



## EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name:	License Number:
Operator Address:	
Contact Person:	Phone Number: (     )     -
Permit Number (API No. if applicable):	Lease Name:
Source of Waste:	Well Number:
<input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit	Source Location (QQQQ): _____ - _____ - _____ - _____
<input type="checkbox"/> Workover Pit <input type="checkbox"/> Drilling Pit	Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West
<input type="checkbox"/> Burn Pit <input type="checkbox"/> Haul-off Pit	_____ Feet from <input type="checkbox"/> North / <input type="checkbox"/> South Line of Section
<input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape	_____ Feet from <input type="checkbox"/> East / <input type="checkbox"/> West Line of Section
<input type="checkbox"/> Dike	GPS Location: Lat: _____, Long: _____
	<small>(e.g. xx.xxxxx)    (e.g. -xxx.xxxxx)</small>
	Datum: <input type="checkbox"/> NAD27 <input type="checkbox"/> NAD83 <input type="checkbox"/> WGS84
	County: _____

No Waste to be Hauled:  (If checked, provide an explanation as to why no waste was hauled in the Comments area.)

Type of waste to be disposed:  Fluid    Soil    Mud / Cuttings    Other: \_\_\_\_\_

Amount of waste: \_\_\_\_\_ No. of loads     \_\_\_\_\_ Barrels     \_\_\_\_\_ Tons     \_\_\_\_\_ YDS

Destination of waste:  Reserve Pit    Haul Off Pit    Disposal Well    Lease Road    Dike / Berm    Other: \_\_\_\_\_

If waste is transferred to another reserve pit, is the lease active?  Yes    No

Location of Waste Disposal:

Destination Out of State:  (If checked, provide the location of where the waste was hauled in the Comments area.)

Date of Waste Transfer: \_\_\_\_\_

Operator Name: \_\_\_\_\_ License No.: \_\_\_\_\_

Lease Name: \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ R. \_\_\_\_\_  East  West

Docket No./API No.: \_\_\_\_\_ County: \_\_\_\_\_

Comments:

Submitted Electronically