1213616

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Haffner, Dan

License Number: 32593

Operator Address: RR 2 BOX 49 HOXIE KS 67740 9524

Contact Person: dan haffner

Phone Number: (785) 657 - 1299

Permit Number *(API No. if applicable)*: 15-065-23663-00-00

Lease Name: BEAN

Well Number: 1

Source of Waste:

- ☐ Emergency Pit
- ☐ Settling Pit
- ☐ Workover Pit
- ☑ Drilling Pit
- ☐ Burn Pit
- ☐ Haul-off Pit
- ☐ Steel Pit
- ☐ Spill / Escape
- ☐ Dike

Source Location (QQQQ): ____ - SW - SW - SE

Sec. 12 Twp. 9 R. 25 ☐ East ☑ West

425 Feet from ☐ North / ☑ South Line of Section

2290 Feet from ☑ East / ☐ West Line of Section

GPS Location: Lat: ____ *(e.g. xx.xxxxx)*, Long: ____ *(e.g. -xxx.xxxxx)*

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Graham

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:

not required to haul waste

Submitted Electronically

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202