



## EXPLORATION &amp; PRODUCTION WASTE TRANSFER

Operator Name:	License Number:
Operator Address:	
Contact Person:	Phone Number: (      )      -
Permit Number (API No. if applicable):	Lease Name:
Source of Waste:  <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit  <input type="checkbox"/> Workover Pit <input type="checkbox"/> Drilling Pit  <input type="checkbox"/> Burn Pit <input type="checkbox"/> Haul-off Pit  <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape  <input type="checkbox"/> Dike	Well Number:
	Source Location (QQQQ): _____ - _____ - _____ - _____
	Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West
	_____ Feet from <input type="checkbox"/> North / <input type="checkbox"/> South Line of Section
	_____ Feet from <input type="checkbox"/> East / <input type="checkbox"/> West Line of Section
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: <input type="checkbox"/> (If checked, provide an explanation as to why no waste was hauled in the Comments area.)	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____	
Amount of waste:      _____ No. of loads      _____ Barrels      _____ Tons      _____ YDS	
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input type="checkbox"/> Other: _____	
If waste is transferred to another reserve pit, is the lease active? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location of Waste Disposal:	
Destination Out of State: <input type="checkbox"/> (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. _____ <input type="checkbox"/> East <input type="checkbox"/> West
Docket No./API No.: _____	County: _____
Comments:	
Submitted Electronically	

## Summary of Changes

Lease Name and Number: STERNBERGER B 2

API/Permit #: 15-007-24218-00-00

Doc ID: 1226092

Correction Number: 1

Field Name	Previous Value	New Value
LocationInfoLink	<a href="https://kolar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=12&amp;t2310">https://kolar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=12&amp;t2310</a>	<a href="https://kolar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=12&amp;t2210">https://kolar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=12&amp;t2210</a>
Number of Feet East or West From Section Line	2310	2210
Number of Feet North or South From Section Line	2310	500
Permit Number	15-007-24217-00-00	15-007-24218-00-00
Quarter Call 2	NE	SE
Quarter Call 3	NE	SE
Quarter Call 4 - Smallest		NW
Save Link	<a href="https://kolar.kgs.ku.edu/kcc/detail/operatorEditDetail.cfm?docID=1226076">../kcc/detail/operatorEditDetail.cfm?docID=1226076</a>	<a href="https://kolar.kgs.ku.edu/kcc/detail/operatorEditDetail.cfm?docID=1226092">../kcc/detail/operatorEditDetail.cfm?docID=1226092</a>
Well Number	3	2