



**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:<br><br><input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit<br><br><input type="checkbox"/> Workover Pit <input type="checkbox"/> Drilling Pit<br><br><input type="checkbox"/> Burn Pit <input type="checkbox"/> Haul-off Pit<br><br><input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape<br><br><input type="checkbox"/> Dike | Well Number:  |
|   | Source Location (QQQQ): _____ - _____ - _____ - _____<br>Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West<br>_____<br>Feet from <input type="checkbox"/> North / <input type="checkbox"/> South Line of Section<br>_____<br>Feet from <input type="checkbox"/> East / <input type="checkbox"/> West Line of Section |
|   | GPS Location: Lat: _____, Long: _____<br><small>(e.g. xx.xxxxx)</small> <span style="margin-left: 200px;"><small>(e.g. -xxx.xxxxx)</small></span><br>Datum: <input type="checkbox"/> NAD27 <input type="checkbox"/> NAD83 <input type="checkbox"/> WGS84<br>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**