

Kansas Corporation Commission Oil & Gas Conservation Division

270502

Form CDP-5 May 2011 Form must be Typed

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:					
Emergency Pit Settling Pit Workover Pit Drilling Pit Burn Pit Haul-off Pit Steel Pit Spill / Escape Dike	Source Location (QQQQ):					
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: Soil Mud / Cuttings Other:						
Amount of waste: No. of loads Barrels	Tons YDS					
Destination of waste: Reserve Pit Haul Off Pit Disposal Well	Phone Number: () - Lease Name: Well Number: It					
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:						
Lease Name:	Sec Twp R East West					
Docket No./API No.:	County:					
Comments:						
Submitted Electronically						

BULLSEYE OILFIELD SERVICE, INC.

FIELD TICKET

P.O. BOX 8778 PRATT, KANSAS 67124 620- 672-7240

FULLY INSURED . RADIO DISPATCHED

66423

To	10-16-14				
LEASE VE Miskemen COUNTY	WELL NO				
	LOADS	BBLS.	HRS.	UNIT PRICE	TOTAL
HAUL SALT WATER TO DISPOSAL WELL TOP GAUGE BOTTOM GAUGE					
Empty Pit	/	20	1	8520	8500
PULL PLATE AND MOPPED OUT TANK NO.					
SPRAYING LEASE ROAD					
DISPOSAL FEE Breken					
ORDERED BY DRI	VER	3 ru	en	TAY	/LOR PRINTING, INC., PRAT