KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

1277029

Form CDP-5
May 2011
Form must be Typed

# EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Indian Oil Co., Inc.
License Number: 31938

Operator Address: PO BOX 209 2507 SE US 160 HWY MEDICINE LODGE KS 67104 0209

Contact Person: Joscelyn Nittler
Phone Number: ( 620 ) 886 - 3763

Permit Number *(API No. if applicable)*: 15-007-24283-00-00
Lease Name: Achenbach

Source of Waste:

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

Well Number: 40

Source Location (QQQQ): _____ - NW - NE - SW

Sec. 1 Twp. 35 R. 13 ☐ East ☑ West

2310 Feet from ☐ North / ☑ South Line of Section

1650 Feet from ☐ East / ☑ West Line of Section

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

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Barber

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: 1 No. of loads 130 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: 8/25/2015

Operator Name: Indian Oil Co., Inc.
License No.: 31938

Lease Name: BK Ohlson SWD 2
Sec. 15 Twp. 35 R. 12 ☐ East ☑ West

Docket No./API No.: 15-007-24216-00-00
County: Barber

Comments:

Submitted Electronically

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