

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form must be Typed

Form CDP-5 May 2011

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: |
| Image: Setting Pit Setting Pit Image: Setting Pit Source Location (QQQQ): | |
| If waste is transferred to another reserve pit, is the lease active? | |
| 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 | |