

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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: [ ] Emergency Pit [ ] Settling Pit [ ] Workover Pit [ ] Drilling Pit [ ] Burn Pit [ ] Haul-off Pit [ ] Steel Pit [ ] Spill / Escape [ ] Dike
Well Number:
Source Location (QQQQ): - - - -
Sec. Twp. R. [ ] East [ ] West
Feet from [ ] North / [ ] South Line of Section
Feet from [ ] East / [ ] West Line of Section
GPS Location: Lat: , Long:
Datum: [ ] NAD27 [ ] NAD83 [ ] WGS84
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