KOLAR Document ID: 1430151

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Lakeshore Operating, LLC	License Number: 35122
Operator Address: 23 1/2 E. MADISON AVE SUITE A IOLA KS 66749 3329	
Contact Person: Jennifer Peters	Phone Number: (844) 557 - 4673
Permit Number *(API No. if applicable)*: 15-205-28454-00-00	Lease Name: RENN
Source of Waste:	Well Number: LO-19

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

Source Location (QQQQ): SE - NW - NE - NE
Sec. 21 Twp. 30 R. 16 ☑ East ☐ West
398 Feet from ☑ North / ☐ South Line of Section
978 Feet from ☑ East / ☐ West Line of Section
GPS Location: Lat: _____ *(e.g. xx.xxxxx)* , Long: _____ *(e.g. -xxx.xxxxx)*
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Wilson

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:

Natural Evaporation

Submitted Electronically