KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Reusch Well Service, Inc.
License Number: 4441
Operator Address: PO BOX 520 OTTAWA KS 66067 0520
Contact Person: LIZ REUSCH
Phone Number: (785) 242 - 2043
Permit Number *(API No. if applicable)*: 15-059-27203-00-00
Lease Name: CHAMBERS
Well Number: 10

Source of Waste:

- [ ] Emergency Pit
- [ ] Settling Pit
- [ ] Workover Pit
- [x] Drilling Pit
- [ ] Burn Pit
- [ ] Haul-off Pit
- [ ] Steel Pit
- [ ] Spill / Escape
- [ ] Dike

Source Location (QQQQ): NW - NE - SE - SE
Sec. 19 Twp. 16 R. 21 [x] East [ ] West
1000 Feet from [ ] North / [x] South Line of Section
520 Feet from [x] East / [ ] West Line of Section
GPS Location: Lat: _____ (e.g. xx.xxxxx), Long: _____ (e.g. -xxx.xxxxx)
Datum: [ ] NAD27 [ ] NAD83 [ ] WGS84
County: Franklin

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: [x] Fluid [ ] Soil [ ] Mud / Cuttings [ ] Other: _____

Amount of waste: _____ No. of loads 70 Barrels _____ Tons _____ YDS

Destination of waste: [ ] Reserve Pit [ ] Haul Off Pit [x] 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: 12/05/2018

Operator Name: Reusch Well Service, Inc.
License No.: 4441
Lease Name: SLAVEN WW 4
Sec. 19 Twp. 16 R. 21 [x] East [ ] West
Docket No./API No.: 15-059-25375-00-00
County: Franklin

Comments:

Submitted Electronically