KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Farmer, John O., Inc.
License Number: 5135
Operator Address: 370 W WICHITA AVE PO BOX 352 RUSSELL KS 67665 0352
Contact Person: Marge Schulte
Phone Number: (785) 483 - 3144
Permit Number *(API No. if applicable)*: 15-167-24084-00-00
Lease Name: MCALLISTER UNIT
Well Number: 1

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 - NW - NW - NE
Sec. 17 Twp. 12 R. 13 [ ] East [x] West
125 Feet from [x] North / [ ] South Line of Section
2750 Feet from [ ] East / [x] West Line of Section
GPS Location: Lat: _____ *(e.g. xx.xxxxx)*, Long: _____ *(e.g. -xxx.xxxxx)*
Datum: [ ] NAD27 [ ] NAD83 [ ] WGS84
County: Russell

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: 4 No. of loads 320 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: 07/19/2019

Operator Name: Farmer, John O., Inc.
License No.: 5135
Lease Name: TRAPP B 2
Sec. 8 Twp. 12 R. 13 [ ] East [x] West
Docket No./API No.: D28844.0
County: Russell

Comments:

Submitted Electronically