KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Jones, Stephen C.
License Number: 33453
Operator Address: 2332 W NEW ORLEANS BROKEN ARROW OK 74011 1592
Contact Person: Steve Jones
Phone Number: (612) 859 - 0046
Permit Number *(API No. if applicable)*: 15-031-24388-00-00
Lease Name: ANDERSON
Well Number: 2B

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): _____ - NE - NE - NE
Sec. 14 Twp. 21 R. 13 [x] East [ ] West
330 Feet from [x] North / [ ] South Line of Section
330 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: Coffey

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 160 Barrels _____ Tons _____ YDS

Destination of waste: [ ] Reserve Pit [ ] Haul Off Pit [ ] Disposal Well [x] 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: 10/01/2019

Operator Name: Jones, Stephen C.
License No.: 33453
Lease Name: _____
Sec. 14 Twp. 21 R. 13 [x] East [ ] West
Docket No./API No.: _____
County: Coffey

Comments:

Submitted Electronically