

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: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape <input type="checkbox"/> Dike	Well Number: Source Location (QQQQ): _____ - _____ - _____ - _____ Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West _____ Feet from <input type="checkbox"/> North / <input type="checkbox"/> South Line of Section _____ Feet from <input type="checkbox"/> East / <input type="checkbox"/> West Line of Section GPS Location: Lat: _____, Long: _____ <small>(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)</small> Datum: <input type="checkbox"/> NAD27 <input type="checkbox"/> NAD83 <input type="checkbox"/> WGS84 County: _____
	No Waste to be Hauled: <input type="checkbox"/> (If checked, provide an explanation as to why no waste was hauled in the Comments area.)
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____	
Amount of waste: _____ No. of loads _____ Barrels _____ Tons _____ YDS	
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input type="checkbox"/> Other: _____	
If waste is transferred to another reserve pit, is the lease active? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location of Waste Disposal: Destination Out of State: <input type="checkbox"/> (If checked, provide the location of where the waste was hauled in the Comments area.) <div style="text-align: right;">Date of Waste Transfer: _____</div> Operator Name: _____ License No.: _____ Lease Name: _____ Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West Docket No./API No.: _____ County: _____ Comments:	
Submitted Electronically	

Paul's Oilfield Service, Inc.

P.O. Box 1773
Great Bend, KS 67530

RECEIVED

MAR 16 2020

WICHITA

RECEIVED
MAR - 9 2020
GREAT BEND

Invoice

DATE	INVOICE #
3/4/2020	99269

BILL TO
Abercrombie Energy, LLC 5510 Oil Center Road South Great Bend, KS 67530

TERMS
Due on receipt

DESCRIPTION	RATE	QUANTITY	AMOUNT
STEGALL #1 : Loaded 80 bbls of fresh water from yard, truck to location, hooked up to cement trucks, plugged well, truck to Beckerdite SWD, unloaded, truck to yard.			
Vacuum Truck - Eddie	90.00	3	270.00T
Fresh Water Fee	0.50	80	40.00T
Salt Water Disposal Fee	0.30	40	12.00T
VENDOR NUMBER _____			
VOUCHER NUMBER _____			
VERIF OF RECEIPT _____ <i>AK</i>			
CODE NUMBER _____	AMOUNT		
<u>1354050</u> _____			
<u>STEGA</u> _____			
<u>WATER TK TO P&A WELL</u> _____			
APPROVAL <i>[Signature]</i> _____			
VERIFIED ACCURACY _____			

Subtotal	\$322.00
Sales Tax (8.5%)	\$27.37
Total	\$349.37
Payments/Credits	\$0.00
Balance Due	\$349.37

Thank you for your business.

5013-9-20