KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Carmen Schmitt, Inc.
License Number: 6569

Operator Address: PO BOX 47 GREAT BEND KS 67530 0047

Contact Person: Matt Suchy
Phone Number: (620) 793 - 5100

Permit Number *(API No. if applicable)*: 15-051-02681-00-00
Lease Name: POLIFKA

Source of Waste:

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

Well Number: 2

Source Location (QQQQ): _____ - SE - NW - NW

Sec. 6 Twp. 13 R. 17 [ ] East [x] West

990 Feet from [x] North / [ ] South Line of Section

990 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: Ellis

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 [x] Other: NA

Amount of waste: 0 No. of loads 0 Barrels _____ Tons _____ YDS

Destination of waste: [ ] Reserve Pit [ ] Haul Off Pit [ ] Disposal Well [ ] Lease Road [ ] Dike / Berm [x] Other: NA

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: 5/28/2020

Operator Name: Carmen Schmitt, Inc.
License No.: 6569

Lease Name: _____
Sec. 6 Twp. 13 R. 17 [ ] East [x] West

Docket No./API No.: _____
County: Ellis

Comments:

Submitted Electronically