KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Jones Oil, LLC
License Number: 30116
Operator Address: 112 N GRAY St ST JOHN KS 67576 1923
Contact Person: Steve Jones
Phone Number: (620) 546 - 3856
Permit Number *(API No. if applicable)*: 15-151-22519-00-00
Lease Name: SHRIVER
Well Number: 4

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): N2 - SW - SW - NW
Sec. 16 Twp. 26 R. 11 [ ] East [x] West
2015 Feet from [x] North / [ ] South Line of Section
330 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: Pratt

No Waste to be Hauled: [x] *(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 [ ] Other: _____

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

Destination of waste: [ ] Reserve Pit [ ] Haul Off Pit [ ] 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: _____

Operator Name: _____ License No.: _____

Lease Name: _____ Sec. _____ Twp. _____ R. _____ [ ] East [ ] West

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

Comments:

Pits will be air dried and back filled with clean dirt.

Submitted Electronically