KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Jaspar Co.
License Number: 34903
Operator Address: PO BOX 1120 HAYS KS 67601 1120
Contact Person: Shane Vehige
Phone Number: (785) 650 - 4910
Permit Number *(API No. if applicable)*: 15-163-22309-00-00
Lease Name: MOLLHAGEN
Well Number: 3

Source of Waste:

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

Source Location (QQQQ): _____ - SW - SW - SE
Sec. 32 Twp. 6 R. 20 [ ] East [x] West
330 Feet from [ ] North / [x] South Line of Section
2310 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: Rooks

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 60 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: 04/13/2021

Operator Name: Jaspar Co.
License No.: 34903
Lease Name: VEHIGE 1
Sec. 33 Twp. 6 R. 20 [ ] East [x] West
Docket No./API No.: D23315.0
County: Rooks

Comments:

Submitted Electronically