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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Rockin G. Energy, LLC
License Number: 35266

Operator Address: 650 SILVER SPUR DR PO BOX 2197 WEATHERFORD TX 76086 2197

Contact Person: Kris Grimland
Phone Number: (303) 883 - 4971

Permit Number *(API No. if applicable)*: 15-023-20703-00-00
Lease Name: FEIKERT

Well Number: 44-7

Source of Waste:

- ☐ Emergency Pit
- ☐ Settling Pit
- ☑ Workover Pit
- ☐ Drilling Pit
- ☐ Burn Pit
- ☐ Haul-off Pit
- ☐ Steel Pit
- ☐ Spill / Escape
- ☐ Dike

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

Sec. 7 Twp. 2 R. 41 ☐ East ☑ West

760 Feet from ☐ North / ☑ South Line of Section

1035 Feet from ☑ East / ☐ West Line of Section

GPS Location: Lat: _____ *(e.g. xx.xxxxx)* , Long: _____ *(e.g. -xxx.xxxxx)*

Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84

County: Cheyenne

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 ☐ 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:

The well was plugged by pumping cement down the casing and annulus which let the well be plugged without generating any waste.

Submitted Electronically