KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Ritchie Exploration, Inc.
License Number: 4767
Operator Address: 8100 E 22ND ST N # 700 PO BOX 783188 WICHITA KS 67278 3188
Contact Person: Peter Fiorini
Phone Number: (316) 691 - 9500
Permit Number *(API No. if applicable)*: 15-179-20626-00-00
Lease Name: CATHERINE ROBBEN
Well Number: 6-27

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): E2 - W2 - W2 - NE
Sec. 27 Twp. 8 R. 26 [ ] East [x] West
3960 Feet from [ ] North / [x] South Line of Section
3080 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: Sheridan

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: 05/14/2021

Operator Name: Ritchie Exploration, Inc.
License No.: 4767
Lease Name: CATHERINE ROBBEN OWWO 13-27
Sec. 27 Twp. 8 R. 26 [ ] East [x] West
Docket No./API No.: 15-179-00123-00-01
County: Sheridan

Comments:

Submitted Electronically