KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Leis, Steven A.
License Number: 33900
Operator Address: 1135 30TH RD YATES CENTER KS 66783 5107
Contact Person: steve
Phone Number: (620) 330 - 6328
Permit Number *(API No. if applicable)*: 15-207-29800-00-00
Lease Name: EGGERS
Well Number: EAST WSW

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): NE - NE - SW - NW
Sec. 34 Twp. 25 R. 15 [x] East [ ] West
1600 Feet from [x] North / [ ] South Line of Section
1005 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: Woodson

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 [x] Mud / Cuttings [ ] Other: _____

Amount of waste: 1 No. of loads _____ Barrels _____ Tons _____ YDS

Destination of waste: [ ] Reserve Pit [ ] Haul Off Pit [ ] Disposal Well [ ] Lease Road [ ] Dike / Berm [x] Other: Air dried pits and filled in

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: 11/30/2021

Operator Name: Leis, Steven A.
License No.: 33900
Lease Name: _____
Sec. 31 Twp. 25 R. 15 [x] East [ ] West
Docket No./API No.: _____
County: Woodson

Comments:

Submitted Electronically