KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Colt Energy Inc
License Number: 5150
Operator Address: PO BOX 388 IOLA KS 66749 0388
Contact Person: Wes Moots
Phone Number: (620) 750 - 0045
Permit Number *(API No. if applicable)*: 15-001-31769-00-00
Lease Name: JOHNSON, D
Well Number: 33

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): ____ - NW - SE - SW
Sec. 11 Twp. 24 R. 18 [x] East [ ] West
1254 Feet from [ ] North / [x] South Line of Section
3945 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: Allen

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 267 Barrels ____ Tons ____ YDS

Destination of waste: [ ] Reserve Pit [ ] Haul Off Pit [ ] Disposal Well [x] 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: 4/21/2023

Operator Name: Colt Energy Inc
License No.: 5150
Lease Name: ____
Sec. 11 Twp. 24 R. 18 [x] East [ ] West
Docket No./API No.: ____
County: Allen

Comments:

Submitted Electronically