KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Jackson, Samuel E and Charity M dba Samuel Jackson Production Co
License Number: 35894

Operator Address: 351 210TH ST GARLAND KS 66741 5126

Contact Person: Samuel Jackson
Phone Number: (620) 224 - 8254

Permit Number *(API No. if applicable)*: 15-107-25547-00-00
Lease Name: TEAGARDEN

Source of Waste:

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

Well Number: P-H16

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

Sec. 2 Twp. 20 R. 23 [x] East [ ] West

1155 Feet from [ ] North / [x] South Line of Section

5115 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: Linn

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 50 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: 11/10/2023

Operator Name: Jackson, Samuel E and Charity M dba Samuel Jackson Production Co
License No.: 35894

Lease Name: _____
Sec. 2 Twp. 20 R. 23 [x] East [ ] West

Docket No./API No.: _____
County: Linn

Comments:

Submitted Electronically