

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name:	License Number:
Operator Address:	
Contact Person:	Phone Number: () -
Permit Number (API No. if applicable):	Lease Name:
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape <input type="checkbox"/> Dike	Well Number: Source Location (QQQQ): _____ - _____ - _____ - _____ Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West _____ Feet from <input type="checkbox"/> North / <input type="checkbox"/> South Line of Section _____ Feet from <input type="checkbox"/> East / <input type="checkbox"/> West Line of Section GPS Location: Lat: _____, Long: _____ <small>(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)</small> Datum: <input type="checkbox"/> NAD27 <input type="checkbox"/> NAD83 <input type="checkbox"/> WGS84 County: _____
	No Waste to be Hauled: <input type="checkbox"/> (If checked, provide an explanation as to why no waste was hauled in the Comments area.)
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____	
Amount of waste: _____ No. of loads _____ Barrels _____ Tons _____ YDS	
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input type="checkbox"/> Other: _____	
If waste is transferred to another reserve pit, is the lease active? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location of Waste Disposal: Destination Out of State: <input type="checkbox"/> (If checked, provide the location of where the waste was hauled in the Comments area.) <div style="text-align: right;">Date of Waste Transfer: _____</div> Operator Name: _____ License No.: _____ Lease Name: _____ Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West Docket No./API No.: _____ County: _____ Comments:	
Submitted Electronically	

Mid-West Oilfield Service Inc
 PO Box 150
 Medicine Lodge, KS 67104-0150

<i>Date</i>	<i>Invoice #</i>
2/12/2024	44883



Bill To:

Briscoe Petroleum, LLC
 c/o J Gerald Knol, CPA
 510 E Memorial Rd, Ste A-2
 Oklahoma City, OK 73114

<i>Driver(s)</i>
<i>Job</i>

<i>Lease</i>	<i>Called By</i>	<i>Terms</i>	<i>Due Date</i>	<i>Ship Date</i>
Olsen Heirs 1	Rick	Net 30	3/13/2024	2/12/2024
<i>Item</i>	<i>Description</i>	<i>Qty</i>	<i>Rate</i>	<i>Amount</i>
Hauling - 130 BBL Transport Lake SWD	2/12 - Job hauled 130 BBL reserve pit water Disposal--- JA 2/12	2.5		
Hauling - 130 BBL Transport Lake SWD	2/12 - Job hauled 130 BBL reserve pit water Disposal--- JA 2/12 Barber County KS	130		
		2.5		
		130		
Office (620) 930-2051 Fax (620) 930-2076		<i>Payments/Credits</i>		\$0.00
midwestoil@sctelcom.net		Balance Due		

Accounts not paid within 30 days of the date of the invoice are subject to a 1.5% monthly finance charge