

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 <i>(API No. if applicable)</i> : _____ | Lease Name: _____ |
| <p>Source of Waste:</p> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="checkbox"/> Emergency Pit </div> <div style="width: 50%;"> <input type="checkbox"/> Settling Pit </div> <div style="width: 50%;"> <input type="checkbox"/> Workover Pit </div> <div style="width: 50%;"> <input type="checkbox"/> Drilling Pit </div> <div style="width: 50%;"> <input type="checkbox"/> Burn Pit </div> <div style="width: 50%;"> <input type="checkbox"/> Haul-off Pit </div> <div style="width: 50%;"> <input type="checkbox"/> Steel Pit </div> <div style="width: 50%;"> <input type="checkbox"/> Spill / Escape </div> <div style="width: 50%;"> <input type="checkbox"/> Dike </div> </div> | <p>Well Number: _____</p> <p>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</p> <p>GPS Location: Lat: _____ , Long: _____ <small>(e.g. xx.xxxxx)</small> <small>(e.g. -xxx.xxxxx)</small></p> <p>Datum: <input type="checkbox"/> NAD27 <input type="checkbox"/> NAD83 <input type="checkbox"/> WGS84</p> <p>County: _____</p> |
| No Waste to be Hauled: <input type="checkbox"/> <i>(If checked, provide an explanation as to why no waste was hauled in the Comments area.)</i> | |
| 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 | |
| <p>Location of Waste Disposal:</p> <p>Destination Out of State: <input type="checkbox"/> <i>(If checked, provide the location of where the waste was hauled in the Comments area.)</i></p> <p style="text-align: right;">Date of Waste Transfer: _____</p> | |
| 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