

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Dixon Operating Company, LLC	License Number: 35162
Operator Address: 1625 N WATERFRONT PKWY STE 220 WICHITA KS 67206 6620	
Contact Person: TJ Dixon	Phone Number: (316) 264 - 9632
Permit Number (API No. if applicable): 15-185-24168-00-00	Lease Name: KRANKENBERG
Source of Waste: ☐ Emergency Pit ☐ Settling Pit ☐ Workover Pit ☒ Drilling Pit ☐ Burn Pit ☐ Haul-off Pit ☐ Steel Pit ☐ Spill / Escape ☐ Dike	Well Number: 3 Source Location (QQQQ): <u> N2 </u> - <u> S2 </u> - <u> SE </u> - <u> NE </u> Sec. <u> 33 </u> Twp. <u> 22 </u> R. <u> 12 </u> ☐ East ☒ West <u> 3070 </u> Feet from ☐ North / ☒ South Line of Section <u> 660 </u> Feet from ☒ East / ☐ West Line of Section GPS Location: Lat: _____, Long: _____ (e.g. xx.xxxxx) (e.g. -xxx.xxxxx) Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84 County: <u> Stafford </u>
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 ☐ Mud / Cuttings ☐ Other: _____	
Amount of waste: _____ No. of loads <u> 480 </u> Barrels _____ Tons _____ YDS	
Destination of waste: ☐ Reserve Pit ☐ Haul Off Pit ☒ Disposal Well ☐ 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: <u> 1/20/2025 </u>	
Operator Name: <u> Dixon Operating Company, LLC </u>	License No.: <u> 35162 </u>
Lease Name: <u> SIEFKES SWD OWWO 1 </u>	Sec. <u> 34 </u> Twp. <u> 22 </u> R. <u> 12 </u> ☐ East ☒ West
Docket No./API No.: <u> D32548.0 </u>	County: <u> Stafford </u>
Comments:	

Submitted Electronically