

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: ☐ Emergency Pit ☐ Settling Pit ☐ Workover Pit ☐ Drilling Pit ☐ Burn Pit ☐ Haul-off Pit ☐ Steel Pit ☐ Spill / Escape ☐ Dike	Well Number: Source Location (QQQQ): _____ - _____ - _____ - _____ Sec. _____ Twp. _____ R. _____ ☐ East ☐ West _____ Feet from ☐ North / ☐ South Line of Section _____ Feet from ☐ East / ☐ West Line of Section GPS Location: Lat: _____, Long: _____ (e.g. xx.xxxxx) (e.g. -xxx.xxxxx) Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84 County: _____
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 _____ 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: _____	
Operator Name: _____	License No.: _____
Lease Name: _____	Sec. _____ Twp. _____ R. _____ ☐ East ☐ West
Docket No./API No.: _____	County: _____
Comments:	

Submitted Electronically

BARTON COUNTY SOLID WASTE
350 NE 30 RD ** See Note Below
Great Bend, KS 67530 793-1898

188 HazMat Response, Inc.
1203 C South Parker
Olathe KS 66061

LT-02
6R251291

SITE	TICKET	GRID		WEIGHMASTER	
002	00236598			Sarah	
DATE IN	DATE OUT	TIME IN	TIME OUT	VEHICLE	ROLL OFF
08/27/25	08/27/25	08:01	08:18		
REFERENCE		ORIGIN			

SCALE 1 GROSS WT 0 LB Inbound Ticket
SCALE 1 TARE WT 0 LB
NET WEIGHT 0 LB

6R251291
J-339

QTY.	UNIT	DESCRIPTION	RATE	EXTENSION	FEE	TOTAL
2284.68	EA	SWD-Liquid - Gallon	0.250	571.17	0.00	571.17

Operating hours 8AM to 5PM Monday thru Friday, 8AM to 4 Saturdays. *Remit payments on account to Barton County Waste; 1400 Main, Room 208; Great Bend, KS 67530*
Hazardous, unauthorized, & PCB materials not accepted.

NET AMOUNT
571.17
TENDERED
CHANGE
CHECK NO.

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of 1		3. Emergency Response Phone 800-229-5252		4. Waste Tracking Number	
5. Generator's Name and Mailing Address One OK / Magellan Pipeline 100 W 5th Street Tulsa OK 74103 Generator's Phone: 918 588-7116		Att: Raven Blunt Generator's Site Address (if different than mailing address) One OK Inc (Various Locations)							
6. Transporter 1 Company Name Haz-Mat Response, Inc		U.S. EPA ID Number K S D 9 8 5 0 1 6 0 4 7							
7. Transporter 2 Company Name		U.S. EPA ID Number							
8. Designated Facility Name and Site Address Barton County Landfill 350 NE 30th Road Great Bend KS 67530 Facility's Phone: 620 793-1898		U.S. EPA ID Number							
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers		11. Total Quantity	12. Unit Wt./Vol.	
	No.				Type				
		1. DRILL MUD AND WATER	0	0	1	CM	80 Barrels		
		2.							
		3.							
	4.								
13. Special Handling Instructions and Additional Information BILL TO HAZ-MAT RESPONSE INC 1203C SOUTH PARKER OLATHE KS 66061 GR 251291 T-339									
14. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.									
Generator's/Officer's Printed/Typed Name Matt Langston for ONE OK Inc					Signature Matt Langston		Month Day Year 8 26 25		
TRANSPORTER	15. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit: _____ Transporter Signature (for exports only): _____ Date leaving U.S.: _____								
	16. Transporter Acknowledgment of Receipt of Materials								
	Transporter 1 Printed/Typed Name FRED CASTILLO					Signature <i>Fred Castillo</i>		Month Day Year 8 26 25	
	Transporter 2 Printed/Typed Name					Signature		Month Day Year	
DESIGNATED FACILITY	17. Discrepancy								
	17a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection								
	Manifest Reference Number: _____								
	17b. Alternate Facility (or Generator)					U.S. EPA ID Number			
	Facility's Phone: _____								
	17c. Signature of Alternate Facility (or Generator)					Month Day Year			
18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a									
Printed/Typed Name Gina Werth					Signature <i>Gina Werth</i>		Month Day Year 18 12 25		

BARTON COUNTY SOLID WASTE
350 NE 30 RD ** See Note Below
Great Bend, KS 67530 793-1898

188 HazMat Response, Inc.
1203 C South Parker
Olathe KS 66061

GR251291

A-02

SITE	TICKET	GRID		WEIGHMASTER	
002	00236588			GINA	
DATE IN	DATE OUT	TIME IN	TIME OUT	VEHICLE	ROLL OFF
08/26/25	08/26/25	15:35	15:57		
REFERENCE			ORIGIN		
ETHAN					

SCALE 1 GROSS WT 0 LB Inbound Ticket
SCALE 1 TARE WT 0 LB
NET WEIGHT 0 LB

QTY.	UNIT	DESCRIPTION	RATE	EXTENSION	FEE	TOTAL
2019.58	EA	SWD-Liquid - Gallon	0.250	504.90	0.00	504.90

Operating hours 8AM to 5PM Monday thru Friday, 8AM to 4 Saturdays. *Remit payments on account to Barton County Waste; 1400 Main, Room 208; Great Bend, KS 67530* Hazardous, unauthorized, & PCB materials not accepted.

NET AMOUNT
504.90
TENDERED
CHANGE
CHECK NO.

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of 1		3. Emergency Response Phone 800-229-5252		4. Waste Tracking Number		
5. Generator's Name and Mailing Address One OK / Magellan Pipeline 100 W 5th Street Tulsa OK 74103 Generator's Phone: 918 588-7116		Att: Raven Blunt				Generator's Site Address (if different than mailing address) One OK Inc (Various Locations)				
6. Transporter 1 Company Name Haz-Mat Response, Inc						U.S. EPA ID Number K S D 9 8 5 0 1 6 0 4 7				
7. Transporter 2 Company Name						U.S. EPA ID Number				
8. Designated Facility Name and Site Address Barton County Landfill 350 NE 30th Road Great Bend KS 67530 Facility's Phone: 620 793-1898						U.S. EPA ID Number				
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.		
		1. DRILL MUD AND WATER			0 0 1 CM					
		2.								
		3.								
		4.								
13. Special Handling Instructions and Additional Information BILL TO HAZ-MAT RESPONSE INC 1203C SOUTH PARKER OLATHE KS 66061										
14. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.										
Generator's/Officer's Printed/Typed Name Matt Langston for ONE OK Inc					Signature Matt Langston			Month Day Year		
INT'L	15. International Shipments ☐ Import to U.S. ☐ Export from U.S.					Port of entry/exit: _____ Date leaving U.S.: _____				
	Transporter Signature (for exports only): _____									
TRANSPORTER	16. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name Ethan Corbett					Signature Ethan Corbett			Month Day Year 8 26 25	
	Transporter 2 Printed/Typed Name					Signature			Month Day Year	
DESIGNATED FACILITY	17. Discrepancy									
	17a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection									
	Manifest Reference Number: _____									
	17b. Alternate Facility (or Generator)					U.S. EPA ID Number				
	Facility's Phone: _____									
17c. Signature of Alternate Facility (or Generator)					Month Day Year					
18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a										
Printed/Typed Name Gina Wenth					Signature Gina Wenth			Month Day Year 8 12 25		

TON COUNTY SOLID WASTE
350 NE 30 RD ** See Note Below
Great Bend, KS 67530 793-1898

188 HazMat Response, Inc.
1203 C South Parker
Olathe KS 66061

CT-02
GR251291

SITE	TICKET	GRID		WEIGHMASTER	
002	00236542			GINA	
DATE IN	DATE OUT	TIME IN	TIME OUT	VEHICLE	ROLL OFF
08/26/25	08/26/25	08:12	08:40		
REFERENCE		ORIGIN			
ETHAN					

SCALE 1 GROSS WT 0 LB Inbound Ticket
SCALE 1 TARE WT 0 LB
NET WEIGHT 0 LB

QTY.	UNIT	DESCRIPTION	RATE	EXTENSION	FEE	TOTAL
2005.12	EA	SWD-Liquid - Gallon	0.250	501.28	0.00	501.28

Operating hours 8AM to 5PM Monday thru Friday, 8AM to 4
Saturdays. *Remit payments on account to Barton County
Waste; 1400 Main, Room 208; Great Bend, KS 67530*
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NET AMOUNT
501.28
TENDERED
CHANGE
CHECK NO.

NON-HAZARDOUS WASTE MANIFEST		1. Generator ID Number		2. Page 1 of 1		3. Emergency Response Phone 800-229-5252		4. Waste Tracking Number	
		5. Generator's Name and Mailing Address One OK / Magellan Pipeline 100 W 5th Street Tulsa OK 74103 Generator's Phone: 918 588-7116		Att: Raven Blunt		Generator's Site Address (if different than mailing address) One OK Inc (Various Locations)			
6. Transporter 1 Company Name Haz-Mat Response, Inc		U.S. EPA ID Number KSD985016047		7. Transporter 2 Company Name		U.S. EPA ID Number		U.S. EPA ID Number	
8. Designated Facility Name and Site Address Barton County Landfill 350 NE 30th Road Great Bend KS 67530 Facility's Phone: 620 793-1898									
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	
		1. DRILL MUD AND WATER			0 0 1 CM				
		2.							
		3.							
		4.							
13. Special Handling Instructions and Additional Information BILL TO HAZ-MAT RESPONSE INC 1203C SOUTH PARKER OLATHE KS 66061									
14. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste.									
Generator's/Officer's Printed/Typed Name Matt Langston Signature Matt Langston Month Day Year									
15. International Shipments ☐ Import to U.S. ☐ Export from U.S. Port of entry/exit: Date leaving U.S.:									
16. Transporter Acknowledgment of Receipt of Materials									
TRANSPORTER	Transporter 1 Printed/Typed Name Ethan Greff			Signature [Signature]			Month Day Year 8 26 05		
	Transporter 2 Printed/Typed Name			Signature			Month Day Year		
17. Discrepancy									
17a. Discrepancy Indication Space ☐ Quantity ☐ Type ☐ Residue ☐ Partial Rejection ☐ Full Rejection									
Manifest Reference Number: U.S. EPA ID Number									
17b. Alternate Facility (or Generator)									
Facility's Phone: Month Day Year									
17c. Signature of Alternate Facility (or Generator)									
18. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 17a									
Printed/Typed Name Gina Werth Signature [Signature] Month Day Year 8 26 05									

169-BLC-O 6 10498

DESIGNATED FACILITY TO GENERATOR