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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: MAD Operators LLC	License Number: 36164
Operator Address: 7 SW 26 AVE GREAT BEND KS 67530 6525	
Contact Person: Lanny Butner	Phone Number: (316) 253 - 8081
Permit Number *(API No. if applicable)*: 15-063-20452-00-01	Lease Name: LOW RIDER
Source of Waste:	Well Number: 1 SWD

☐ Emergency Pit ☐ Settling Pit
☐ Workover Pit ☑ Drilling Pit
☐ Burn Pit ☐ Haul-off Pit
☐ Steel Pit ☐ Spill / Escape
☐ Dike

Source Location (QQQQ): SW - NE - SE - NE
Sec. 31 Twp. 14 R. 29 ☐ East ☑ West
3388 Feet from ☐ North / ☑ South Line of Section
651 Feet from ☑ East / ☐ West Line of Section
GPS Location: Lat: _____ *(e.g. xx.xxxxx)* , Long: _____ *(e.g. -xxx.xxxxx)*
Datum: ☐ NAD27 ☐ NAD83 ☐ WGS84
County: Gove

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:

Pumper said there were no fluids to haul off

Submitted Electronically