

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Colt Energy Inc	License Number: 5150
Operator Address: PO BOX 388 IOLA KS 66749 0388	
Contact Person: Wes Moots	Phone Number: (620) 750 - 0045
Permit Number (API No. if applicable): 15-001-31969-00-00	Lease Name: CHARLOTTE HOBBS
Source of Waste: ☐ Emergency Pit ☐ Settling Pit ☐ Workover Pit ☐ Drilling Pit ☐ Burn Pit ☐ Haul-off Pit ☒ Steel Pit ☐ Spill / Escape ☐ Dike	Well Number: 122 Source Location (QQQQ): <u>SE</u> - <u>NW</u> - <u>SE</u> - <u>NW</u> Sec. <u>9</u> Twp. <u>24</u> R. <u>18</u> ☒ East ☐ West <u>1930</u> Feet from ☒ North / ☐ South Line of Section <u>1735</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>Allen</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>170</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>10/22/2025</u>	
Operator Name: <u>Colt Energy Inc</u>	License No.: <u>5150</u>
Lease Name: _____	Sec. <u>3</u> Twp. <u>24</u> R. <u>18</u> ☒ East ☐ West
Docket No./API No.: _____	County: <u>Allen</u>
Comments:	

Submitted Electronically