



KANSAS CORPORATION COMMISSION 1032074
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: EOG Resources, Inc.		License Number: 5278	
Operator Address: 3817 NW EXPRESSWAY STE 500 OKLAHOMA CITY OK 73112 1483			
Contact Person: Sheila Rogers		Phone Number: (405) 246 - 3100	
Permit Number (API No. if applicable): 15-067-21685-00-00		Lease Name: LIGHTY	
Source of Waste: <input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Workover Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Spill / Escape		Well Number: 33 #1	
		Source Location (QQQQ): <u>SE</u> - <u>SE</u> - <u>NW</u> - <u>NE</u> Sec. <u>33</u> Twp. <u>29</u> R. <u>35</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1220</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>1620</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section Grant _____ County _____	
Type of waste to be disposed: <input checked="" type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste: <u>5</u> No. of loads <u>600</u> Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input checked="" 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			
Location of waste disposal:		Date of Waste Transfer: <u>10/01/2009</u>	
Operator Name: <u>West Sunset Disposal, LLC</u>		License No.: <u>32462</u>	
Lease Name: <u>ROHER</u>		Sec. <u>36</u> Twp. <u>34</u> R. <u>36</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>D27649</u>		County: <u>Stevens</u>	
Comments:			
<p style="font-size: 2em; transform: rotate(-15deg); opacity: 0.5;">Rec'd 10/13/09</p> <p style="font-size: 1.5em; margin-top: 20px;">Submitted Electronically</p>			