

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Pratt Well Service, Inc.		License Number: 5893
Operator Address: PO Box 907 Pratt, KS 67124		
Contact Person: Kim Hoffman		Phone Number: (620) 770 - 1274
Permit Number (API No. if applicable): 15-195-20282-00-01		Lease Name: Schaus
Source of Waste:		Well Number: #1
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Workover Pit <input 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		Source Location (QQQQ): <u> S/2 </u> - <u> S/2 </u> - <u> SE </u> - Sec. <u> 23 </u> Twp. <u> 11 </u> R. <u> 24 </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u> 330 </u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u> 1320 </u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u> Trego </u> County
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____		
Amount of waste: <u> 0 </u> No. of loads <u> 0 </u> Barrels <u> 0 </u> Tons <u> 0 </u> YDS		
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input 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: _____
Operator Name: _____		License No.: _____
Lease Name: _____		Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West
Docket No./API No.: _____		
Comments:		RECEIVED KANSAS CORPORATION COMMISSION APR 29 2010 CONSERVATION DIVISION WICHITA, KS
The undersigned hereby certifies that he / she is <u> Kenneth C. GATES </u> for <u> Pratt Well Service, INC. </u> (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief.		
Subscribed and sworn to before me on this <u> 28th </u> day of <u> APRIL </u> , <u> 2010 </u>		<u> Kenneth C. Gates </u> Agent Signature
My Commission Expires: <u> 10-01-2011 </u>		<u> Janis S. Parsons </u> Notary Public

