


KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: <u>Terry E. Morris d/b/a GLM Company</u>		License Number: <u>3134</u>	
Operator Address: <u>P. O. Box 193 Russell, Kansas 67665</u>			
Contact Person: <u>Terry E. Morris</u>		Phone Number: <u>(785) 483 - 1307</u>	
Permit Number (API No. if applicable): <u>15-167-20726 0000</u>		Lease Name: <u>Reich "A"</u>	
Source of Waste: <input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Spill / Escape		Well Number: <u>#1</u> Source Location (QQQQ): <u>NE NE SE</u> Sec. <u>17</u> Twp. <u>12</u> R. <u>15</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2,310</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>330</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Russell</u> 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: _____ No. of loads <u>80</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>May 12, 2010</u>	
Operator Name: <u>Terry E. Morris d/b/a GLM Company</u>		License No.: <u>3134</u>	
Lease Name: <u>L Witt #5</u>		Sec. <u>16</u> Twp. <u>12</u> R. <u>15</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No./API No.: <u>15-16791645-00-00</u> <u>GE 24824.3</u>		County: <u>Russell</u>	
Comments:			
			
The undersigned hereby certifies that he / she is <u>OWNER/OPERATOR</u>			
for <u>GLM COMPANY</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>January</u> , <u>2011</u>			
My Commission Expires: <u>7/29/2013</u>		<u>Matthew R. Morris</u> Agent Signature <u>Matthew R. Morris</u> Notary Public	
		RECEIVED JAN 31 2011	