

"Corrected"



KANSAS CORPORATION COMMISSION 1226599
OIL & GAS CONSERVATION DIVISION

Form CDP-5
May 2011
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Quito, Inc.		License Number: 33594
Operator Address: 1613 W 6TH ST BARTLESVILLE OK 74003 3712		
Contact Person: Mark W. McCann		Phone Number: (918) 337 - 4747
Permit Number (API No. if applicable): 15-019-27333-00-00		Lease Name: DEARMOND
Source of Waste: <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 <input type="checkbox"/> Dike		Well Number: M-8
		Source Location (QQQQ): NE - NE - NE - SE (S10) Sec. 15 Twp. 34 R. 12 <input checked="" type="checkbox"/> East <input type="checkbox"/> West 2470 2330 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 170 2837 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section GPS Location: Lat: _____, Long: _____ <small>(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)</small> Datum: <input type="checkbox"/> NAD27 <input type="checkbox"/> NAD83 <input type="checkbox"/> WGS84 County: Chautauqua

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.)

Operator Name: _____	Date of Waste Transfer: _____
Lease Name: _____	License No.: _____
Docket No./API No.: _____	Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West
Comments:	County: _____

FLUIDS ALLOWED TO EVAPORATE, NO WASTE TO BE HAULED.

RECEIVED
 KANSAS CORPORATION COMMISSION
JAN 20 2015
 CONSERVATION DIVISION
 WICHITA, KS

Submitted Electronically