

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
July 2014
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

15-091-24496-00-00

Operator Name: <u>Larry & Donna Pearce</u>		License Number: <u>35565</u>	
Operator Address: <u>20315 S. Gardner Gardner, KS 66030</u>			
Contact Person: <u>Larry Pearce</u>		Phone Number: (<u>913</u>) <u>856</u> - <u>8502</u>	
Permit Number (API No. if applicable): <u>15-091-24496-00-00</u>		Lease Name: <u>Pearce</u>	
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: <u>G-1</u> Source Location (QQQQ): _____ - <u>SW</u> - <u>NW</u> - <u>SW</u> Sec. <u>12</u> Twp. <u>15</u> R. <u>22</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>1601</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>4950</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section GPS Location: Lat: <u>38.7573685</u> , Long: <u>-94.9257423</u> <small>(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)</small> Datum: <input type="checkbox"/> NAD27 <input checked="" type="checkbox"/> NAD83 <input type="checkbox"/> WGS84 County: <u>Johnson</u>	
No Waste to be Hauled: <input type="checkbox"/> (If checked, provide an explanation as to why no waste was hauled in the Comments area.)			
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>20</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: Destination Out of State: <input type="checkbox"/> (If checked, provide the location of where the waste was hauled in the Comments area.)			
Operator Name: <u>Town Oil Company</u>		Date of Waste Transfer: <u>5/9/2018</u>	
Lease Name: <u>Dorsey S1</u>		License No.: <u>6142</u>	
Docket No./API No.: <u>D26829.0</u>		Sec. <u>10</u> Twp. <u>16</u> R. <u>21</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Comments:		County: <u>Franklin</u>	

Received
KANSAS CORPORATION COMMISSION
MAY 29 2018
CONSERVATION DIVISION
WICHITA, KS

UNDER PENALTY OF PERJURY I HEREBY ATTEST THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Date: 5/24/18 Signature: [Signature] Title: Agent