

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2004
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Cherokee Wells, LLC		License Number: 33539	
Operator Address: 4916 Camp Bowie Blvd., Ste. 204, Ft. Worth, TX 76107			
Contact Person: Robert DeFeo		Phone Number: (817) 546 - 0032	
Permit Number (API No. if applicable): 15-10321299 0000		Lease Name: Demaranville	
Source of Waste:		Well Number: 103-INJ	
<input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Steel Pit		Source Location (QQQQ): _____ - <u>NW</u> - <u>SE</u> - <u>NW</u> Sec. <u>3</u> Twp. <u>9S</u> R. <u>20</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West 1937 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 1972 Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>Leavenworth</u> County	
<input checked="" type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste: <u>1</u> No. of loads <u>50</u> Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve 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>August 31, 2007</u>	
Operator Name: <u>Cherokee Wells, LLC</u>		License No.: <u>33539</u>	
Lease Name: <u>Zachariah</u>		Sec. <u>9</u> Twp. <u>9S</u> R. <u>20</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No.: <u>D 28762.0</u>		County: <u>Jefferson</u>	

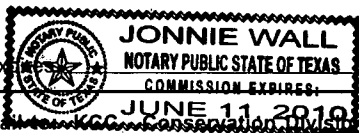
The undersigned hereby certifies that he / she is Manager
for Cherokee Wells, LLC (Co.), a duly authorized agent, that all information shown hereon is true

and correct to the best of his / her knowledge and belief.

Subscribed and sworn to before me on this 10th day of December, 2007

Robert DeFeo
Agent Signature
Jennie Wall
Notary Public

My Commission Expires



RECEIVED
KANSAS CORPORATION COMMISSION

DEC 12 2007