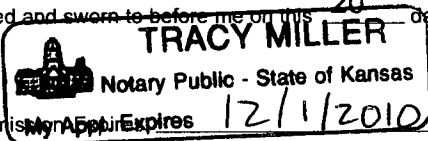


**KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
EXPLORATION & PRODUCTION WASTE TRANSFER**

**RECEIVED**  
KANSAS CORPORATION COMMISSION  
**NOV 28 2007**  
CONSERVATION DIVISION  
WICHITA, KS  
Form CDP-5  
August 2004  
Form must be Typed

Operator Name: <b>Cherokee Wells, LLC</b>		License Number: <b>33539</b>										
Operator Address: <b>P.O. Box 296, Fredonia, KS 66736</b>												
Contact Person: <b>Tracy Miller</b>		Phone Number: <b>( 620 ) 378 - 3650</b>										
Permit Number (API No. if applicable): <b>15-205-27277-00-00</b>		Lease Name: <b>Haley-Beard</b>										
Source of Waste: <table style="width:100%; border:none;"> <tr> <td><input type="checkbox"/> Emergency Pit</td> <td><input type="checkbox"/> Dike</td> </tr> <tr> <td><input type="checkbox"/> Workover Pit</td> <td><input type="checkbox"/> Settling Pit</td> </tr> <tr> <td><input type="checkbox"/> Burn Pit</td> <td><input checked="" type="checkbox"/> Drilling Pit</td> </tr> <tr> <td><input type="checkbox"/> Steel Pit</td> <td><input type="checkbox"/> Haul-off Pit</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Spill / Escape</td> </tr> </table>		<input type="checkbox"/> Emergency Pit	<input type="checkbox"/> Dike	<input type="checkbox"/> Workover Pit	<input type="checkbox"/> Settling Pit	<input type="checkbox"/> Burn Pit	<input checked="" type="checkbox"/> Drilling Pit	<input type="checkbox"/> Steel Pit	<input type="checkbox"/> Haul-off Pit		<input type="checkbox"/> Spill / Escape	Well Number: <b>A-1</b>
<input type="checkbox"/> Emergency Pit	<input type="checkbox"/> Dike											
<input type="checkbox"/> Workover Pit	<input type="checkbox"/> Settling Pit											
<input type="checkbox"/> Burn Pit	<input checked="" type="checkbox"/> Drilling Pit											
<input type="checkbox"/> Steel Pit	<input type="checkbox"/> Haul-off Pit											
	<input type="checkbox"/> Spill / Escape											
Source Location (QQQQ): <b>NE - NW - SW -</b> Sec. <b>27</b> Twp. <b>27</b> R. <b>15</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <b>2290</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <b>980</b> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <b>Wilson</b> 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 <b>240</b> 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: <b>8/26/07</b>										
Operator Name: <b>Cherokee Wells, LLC</b>		License No.: <b>33539</b>										
Lease Name: <b>Arnold A-4 SWD</b>		Sec. <b>31</b> Twp. <b>28</b> R. <b>14</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West										
Docket No.: <b>D-28696</b>		County: <b>Wilson</b>										
The undersigned hereby certifies that he / she is <b>Administrative Assistant</b> for <b>Cherokee Wells, LLC</b> (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief. <i>Shannon Shibe</i> Agent Signature												
Subscribed and sworn to before me on this <b>20</b> day of <b>October</b> <b>2007</b>												
		<i>Tracy Miller</i> Notary Public										