

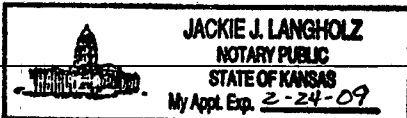
KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2004  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Bowman Oil Company</b>		License Number: <b>6931</b>	
Operator Address: <b>805 Codell Road Codell, Kansas 67663</b>			
Contact Person: <b>Louis "Don" Bowman or William "Bill" Bowman</b>		Phone Number: <b>( 785 ) 434 - 2286 M-F 7-12 AM</b>	
Permit Number (API No. if applicable): <b>163-23651-0000</b>		Lease Name: <b>Fink/Fletcher</b>	
Source of Waste: <input type="checkbox"/> Dike <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		Well Number: <b>#1</b>  Source Location (QQQQ): <b>    NW    SW    NW/4</b> Sec. <b>32</b> Twp. <b>6S</b> R. <b>20</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <b>3914</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <b>4940</b> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <b>Rooks County, Kansas</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>60</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 checked="" type="checkbox"/> No			
Location of waste disposal:		Date of Waste Transfer: <b>January 25, 2008</b>	
Operator Name: <b>Bowman Oil Company</b>		License No.: <b>6931</b>	
Lease Name: <b>Sutor A #9 SWD</b>		Sec. <b>24</b> Twp. <b>10S</b> R. <b>20</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West	
Docket No.: <b>#D-25-212</b>		County: <b>Rooks County, Kansas</b>	

**RECEIVED**  
KANSAS CORPORATION COMMISSION  
**FEB 11 2008**  
CONSERVATION DIVISION  
WICHITA, KS



The undersigned hereby certifies that he /she is     An Agent      
for     Bowman Oil Company     (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     8<sup>th</sup>     day of     February         2008    

My Commission Expires:     2-24-2009    

*Connie Jo Austin*  
Agent Signature

*Jackie J. Langholz*  
Notary Public