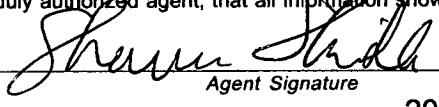
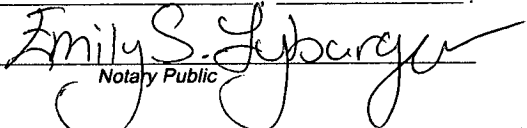


KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**EXPLORATION & PRODUCTION WASTE TRANSFER**

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>Emily Lybarger</b>		Phone Number: ( <b>620</b> ) <b>378 - 3650</b>	
Permit Number (API No. if applicable): <b>15-205-27357-00-00</b>		Lease Name: <b>A. Robinson</b>	
Source of Waste:		Well Number: <b>A-4</b>	
<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		Source Location (QQQQ): <b>C</b> - <b>NW</b> - <b>SE</b> - _____ Sec. <b>32</b> Twp. <b>27</b> R. <b>14</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West 1980 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 1980 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <b>Wilson</b> County	
Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____			
Amount of waste:    _____ No. of loads    _____ Barrels    _____ Tons    _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input 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: _____	
Operator Name: _____		License No.: _____	
Lease Name: _____		Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West	
Docket No.: _____		County: _____	
<p><i>Not sensitive groundwater area.</i></p> <p><i>Fluids not hauled; Allowed to evaporate.</i></p>			
<p><b>RECEIVED</b> KANSAS CORPORATION COMMISSION <b>APR 11 2008</b> CONSERVATION DIVISION WICHITA, KS</p>			
The undersigned hereby certifies that he / she is <u>Administrative Assistant</u> for <u>Cherokee Wells, LLC</u> (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 _____ day of _____, 2008		 Agent Signature	
My Commission Expires: _____		 Notary Public	