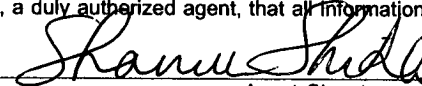
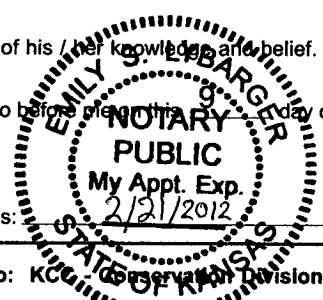
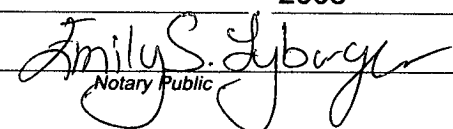


**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
EXPLORATION & PRODUCTION WASTE TRANSFER**

Form CDP-5
August 2004
Form must be Typed

Operator Name: Cherokee Wells, LLC		License Number: 33539	
Operator Address: P.O. Box 296, Fredonia, KS 66736			
Contact Person: Emily Lybarger		Phone Number: (620) 378 - 3650	
Permit Number (API No. if applicable): 15-205-27403-00-00		Lease Name: Thomas	
Source of Waste: <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"/> <input type="checkbox"/> Spill / Escape		Well Number: A-3	
		Source Location (QQQQ): N2 - NW - SW -	
		Sec. 18 Twp. 27 R. 15 <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
		2290 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section	
		660 Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section	
		Wilson _____ 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. Fluids not hauled; Allowed to evaporate.</i></p>			
<p>RECEIVED KANSAS CORPORATION COMMISSION APR 11 2008</p>			
CONSERVATION DIVISION WICHITA, KS			
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 <u>April</u>		_____ 2008	
My Commission Expires: <u>2/21/2012</u>		 Agent Signature	
		 Notary Public	