

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2004
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Paul Bowman Oil Trust		License Number: 33723
Operator Address: 801 Codell Road Codell, Kansas 67663		
Contact Person: Louis "Don" Bowman or Terri Bowman		Phone Number: (785) 434 - 2286 M-F 7-12 AM
Permit Number (API No. if applicable): 15-163-03014 ⁰⁰⁰ #D30,063		Lease Name: Largent-Dick
Source of Waste: <input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> Spill / Escape		Well Number: #1 (SWD) Source Location (QQQQ): _____ <u>SE</u> _____ <u>NE</u> _____ <u>NW</u> Sec. <u>29</u> Twp. <u>10S</u> R. <u>19</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West 990' Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 2310' Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Rooks County, Kansas County

Type of waste to be disposed: Fluid Soil Mud / Cuttings Other: _____

Amount of waste: _____ No. of loads 120 Barrels _____ Tons _____ YDS

Destination of waste: Reserve Pit Disposal Well Lease Road Dike / Berm Other: _____

If waste is transferred to another reserve pit, is the lease active? Yes No

Location of waste disposal: _____ Date of Waste Transfer: **January 12, 2008**

Operator Name: **Bowman Oil Company** License No.: **6931**

Lease Name: **Sutor A #9 SWD** Sec. 24 Twp. 10S R. 20 East West

Docket No.: **D 25-212** County: **Rooks County, Kansas**

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KANSAS CORPORATION COMMISSION
JAN 15 2008
CONSERVATION DIVISION
WICHITA, KS

The undersigned hereby certifies that he / (she) is an agent
for Paul Bowman Oil Trust (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 14th day of January, 2008

My Commission Expires: 2-24-2009

Connie J. Austin
Agent Signature

Jackie J. Langholz
Notary Public

