



KANSAS CORPORATION COMMISSION 1034942
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

Operator Name: Cherokee Wells LLC		License Number: 33539	
Operator Address: 4916 CP BOWIE BLVD STE 204 FT WORTH TX 76107 4181			
Contact Person: Tracy Miller		Phone Number: (620) 378 - 3650	
Permit Number (API No. if applicable): 15-205-27687-0000		Lease Name: W. Collins	
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): <u> N2 </u> <u> S2 </u> <u> SE </u> <u> SW </u> Sec. <u> 25 </u> Twp. <u> 27 </u> R. <u> 14 </u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u> 350 </u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u> 1980 </u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u> Wilson </u> 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 <u> 80 </u> Barrels _____ Tons _____ YDS			
Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off 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: <u> 01/26/2010 </u>	
Operator Name: <u> Cherokee Wells LLC </u>		License No.: <u> 33539 </u>	
Lease Name: <u> ARNOLD </u>		Sec. <u> 31 </u> Twp. <u> 28 </u> R. <u> 14 </u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West	
Docket No./API No.: <u> D28696 </u>		County: <u> Wilson </u>	
Comments:			
<div style="font-size: 2em; transform: rotate(-15deg); opacity: 0.5; position: absolute; top: 20px; right: 20px;"> Acid 01/4/10 </div> <p style="font-size: 1.5em; margin-top: 50px;">Submitted Electronically</p>			