

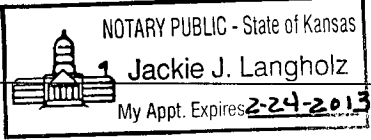
KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-5  
August 2008  
Form must be Typed

**EXPLORATION & PRODUCTION WASTE TRANSFER**

Operator Name: <b>Paul Bowman Oil Trust</b>		License Number: <b>33723</b>
Operator Address: <b>801 Codell Road Codell, Kansas 67663</b>		
Contact Person: <b>Louis "Don" Bowman or Terrii Bowman</b>		Phone Number: ( <b>785</b> ) <b>434 - 2286</b>
Permit Number (API No. if applicable): <b>#15-163-22152-0000</b>		Lease Name: <b>LeSage B</b>
Source of Waste: <input type="checkbox"/> Dike <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Workover Pit <input 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>#4</b>  Source Location (QQQQ): <u>      </u> <u>  </u> <b>S2</b> <u>  </u> <u>  </u> <b>SE</b> <u>  </u> <u>  </u> <b>NE</b> Sec. <b>18</b> Twp. <b>7S</b> R. <b>20</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>  </u> <b>2970</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>  </u> <b>660</b> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>  </u> <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>20</b> 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: <b>December 22, 2010</b>
Operator Name: <b>Paul Bowman Oil Trust</b>		License No.: <b>33723</b>
Lease Name: <b>LeSage #3 SWD</b>		Sec. <b>18</b> Twp. <b>7S</b> R. <b>20</b> <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No./API No.: <b>#D-21,105</b>		County: <b>Rooks County, Kansas</b>
Comments:		

**RECEIVED**  
**DEC 28 2010**  
**KCC WICHITA**

NOTARY PUBLIC - State of Kansas  
  
**1 Jackie J. Langholz**  
 My Appt. Expires **2-24-2013**

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        **22<sup>nd</sup>** day of        **December**,        **2010**.

My Commission Expires:        **2-24-2013**

*Connie Jo Austin*  
Agent Signature

*Jackie J. Langholz*  
Notary Public