

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

Form CDP-5
August 2004
Form must be Typed

07

Operator Name: <u>Cherokee Wells, LLC</u>		License Number: <u>33539</u>
Operator Address: <u>P.O. Box 296, Fredonia, KS 66736</u>		
Contact Person: <u>Tracy Miller</u>		Phone Number: (<u>620</u>) <u>378</u> - <u>3650</u>
Permit Number (API No. if applicable): <u>15-049-22461 6000</u>		Lease Name: <u>Shinkle / Russell Unit 7</u>
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: <u>(A-1)</u> Source Location (QQQQ): <u>SW - SW - SW -</u> Sec. <u>10</u> Twp. <u>29</u> R. <u>13</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>330</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>330</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>Elk</u> County

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

Amount of waste: _____ No. of loads 180 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: 6/15/07

Operator Name: Cherokee Wells, LLC License No.: 33539

Lease Name: Arnold #A-4 SWD Sec. 31 Twp. 28 R. 14 East West

Docket No.: D-28696 County: Wilson

RECEIVED
KANSAS CORPORATION COMMISSION

OCT 05 2007

CONSERVATION DIVISION
WICHITA, KS

The undersigned hereby certifies that he / she is Administrative Assistant
for Cherokee Wells, LLC (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 3rd day of October, 2007

Emily Zubary
Agent Signature

TRACY MILLER
Notary Public - State of Kansas
12/1/2010

Tracy Miller
Notary Public

My Commission Expires _____