

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

Form CDP-5  
August 2004  
Form must be Typed

17

Operator Name: <b>Cherokee Wells, LLC</b>		License Number: <b>33539</b>
Operator Address: <b>P.O. Box 296, Fredonia, KS 66736</b>		
Contact Person: <b>Tracy Miller</b>		Phone Number: <b>( 620 ) 378 - 3650</b>
Permit Number (API No. if applicable): <b>15-205-27188-00-00</b>		Lease Name: <b>R. Jantz</b>
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: <b>A-9</b>
		Source Location (QQQQ): <b>NE - NE - NW -</b> Sec. <b>25</b> Twp. <b>28</b> R. <b>14</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <b>330</b> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <b>2310</b> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <b>Wilson</b> County

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

Amount of waste: \_\_\_\_\_ No. of loads    **240** 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: **7/23/07**

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

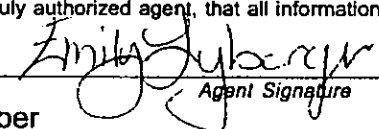
Lease Name: **Arnold #A-4 SWD** Sec. **31** Twp. **28** R. **14**  East  West

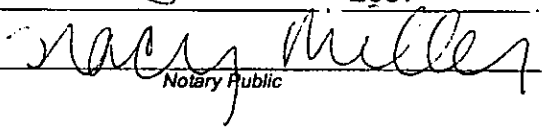
Docket No.: **D-28696** County: **Wilson**

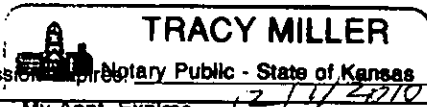
**RECEIVED**  
KANSAS CORPORATION COMMISSION  
**OCT 05 2007**  
CONSERVATION DIVISION  
WICHITA, KS

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**

  
 \_\_\_\_\_  
 Agent Signature

  
 \_\_\_\_\_  
 Notary Public

  
 My Commission Expires **7/11/2010**