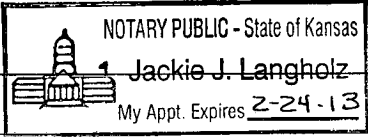


KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-5
August 2008
Form must be Typed

EXPLORATION & PRODUCTION WASTE TRANSFER

| | | |
|--|--|---|
| Operator Name: The Paul Bowman Oil Trust | | License Number: 33723 |
| Operator Address: 801 Codell Road Codell, Kansas 67663 | | |
| Contact Person: Donald A. Bowman | | Phone Number: (785) 434 - 2286 |
| Permit Number (API No. if applicable): #15-163-03014-0002 | | Lease Name: Largent-Dick #1 |
| 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: Source Location (QQQQ): <u> NW - SE - NE - NW </u> Sec. <u> 29 </u> Twp. <u> 10S </u> R. <u> 19 </u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u> 4350 </u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u> 3053 </u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u> Rooks </u> County, Kansas _____ County |
| Type of waste to be disposed: <input type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: <u> No Fluid to Transfer </u> | | |
| Amount of waste: _____ No. of loads <u> 0 </u> Barrels _____ Tons _____ YDS | | |
| Destination of waste: <input type="checkbox"/> Reserve Pit <input type="checkbox"/> Haul Off Pit <input 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: _____ |
| Operator Name: _____ | | License No.: _____ |
| Lease Name: _____ | | Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West |
| Docket No./API No.: _____ | | County: _____ |
| Comments: <p style="text-align: center;">There was no Waste to Transfer after the job was done, no Fluid in the Pit.</p> <div style="text-align: right; font-weight: bold; font-size: 1.2em;"> RECEIVED AUG 10 2011 KCC WICHITA </div> | | |
| The undersigned hereby certifies that he (she) is <u> An Agent </u> for <u> The Paul Bowman Oil Trust </u> (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 <u> 8th </u> day of <u> August </u> , <u> 2011 </u> | | <u> <i>Connie J. Austin</i> </u> Agent Signature |
| My Commission Expires: <u> 2-24-2013 </u> | | <u> <i>Jackie J. Langholz</i> </u> Notary Public |