



KANSAS CORPORATION COMMISSION 1027773  
OIL & GAS CONSERVATION DIVISION

Form CDP-1  
April 2004  
Form must be Typed

APPLICATION FOR SURFACE PIT

Submit in Duplicate

|                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                               |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Operator Name:                                                                                                                                                                                                                                                                                                      |                                                                                                                                                            | License Number:                                                                                                                                                                                                                                                                                                                                               |  |
| Operator Address:                                                                                                                                                                                                                                                                                                   |                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                               |  |
| Contact Person:                                                                                                                                                                                                                                                                                                     |                                                                                                                                                            | Phone Number:                                                                                                                                                                                                                                                                                                                                                 |  |
| Lease Name & Well No.:                                                                                                                                                                                                                                                                                              |                                                                                                                                                            | Pit Location (QQQQ):<br>____ - ____ - ____ - ____<br>Sec. ____ Twp. ____ R. ____ <input type="checkbox"/> East <input type="checkbox"/> West<br>____ Feet from <input type="checkbox"/> North / <input type="checkbox"/> South Line of Section<br>____ Feet from <input type="checkbox"/> East / <input type="checkbox"/> West Line of Section<br>____ County |  |
| Type of Pit:<br><input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit<br><input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit<br><input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit<br>(If WP Supply API No. or Year Drilled)                    | Pit is:<br><input type="checkbox"/> Proposed <input type="checkbox"/> Existing<br>If Existing, date constructed:<br>_____<br>Pit capacity:<br>_____ (bbls) |                                                                                                                                                                                                                                                                                                                                                               |  |
| Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                       |                                                                                                                                                            | Chloride concentration: _____ mg/l<br>(For Emergency Pits and Settling Pits only)                                                                                                                                                                                                                                                                             |  |
| Is the bottom below ground level?<br><input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                       | Artificial Liner?<br><input type="checkbox"/> Yes <input type="checkbox"/> No                                                                              | How is the pit lined if a plastic liner is not used?                                                                                                                                                                                                                                                                                                          |  |
| Pit dimensions (all but working pits): _____ Length (feet) _____ Width (feet) _____ N/A: Steel Pits<br>Depth from ground level to deepest point: _____ (feet) _____ No Pit                                                                                                                                          |                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                               |  |
| If the pit is lined give a brief description of the liner material, thickness and installation procedure.                                                                                                                                                                                                           |                                                                                                                                                            | Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.                                                                                                                                                                                                                                               |  |
| Distance to nearest water well within one-mile of pit<br>_____ feet Depth of water well _____ feet                                                                                                                                                                                                                  |                                                                                                                                                            | Depth to shallowest fresh water _____ feet.<br>Source of information:<br>_____ measured _____ well owner _____ electric log _____ KDWR                                                                                                                                                                                                                        |  |
| <b>Emergency, Settling and Burn Pits ONLY:</b><br>Producing Formation: _____<br>Number of producing wells on lease: _____<br>Barrels of fluid produced daily: _____<br>Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No |                                                                                                                                                            | <b>Drilling, Workover and Haul-Off Pits ONLY:</b><br>Type of material utilized in drilling/workover: _____<br>Number of working pits to be utilized: _____<br>Abandonment procedure: _____<br>_____<br>Drill pits must be closed within 365 days of spud date.                                                                                                |  |
| Submitted Electronically                                                                                                                                                                                                                                                                                            |                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                               |  |

|                      |                      |                    |                                                                            |      |
|----------------------|----------------------|--------------------|----------------------------------------------------------------------------|------|
| KCC OFFICE USE ONLY  |                      | Steel Pit          | RFAC                                                                       | RFAS |
| Date Received: _____ | Permit Number: _____ | Permit Date: _____ | Lease Inspection: <input type="checkbox"/> Yes <input type="checkbox"/> No |      |