



**CLOSURE OF SURFACE PIT**

Operator Name:	License Number:
Operator Address:	
Contact Person:	Phone Number: (     )     -
Permit Number <i>(API No. if applicable)</i> :	Lease Name & Well No.:
Type of Pit:  <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit  <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit  <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit	Pit Location (QQQQ):  _____ - _____ - _____ - _____  Sec. _____ Twp. _____ R. _____ <input type="checkbox"/> East <input type="checkbox"/> West  _____ Feet from <input type="checkbox"/> North / <input type="checkbox"/> South Line of Section  _____ Feet from <input type="checkbox"/> East / <input type="checkbox"/> West Line of Section  _____ County
Date of closure: _____	
Was an artificial liner used? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If no, how were the sides and bottom sealed to prevent downward migration of the pit contents?	
Abandonment procedure of pit:	

Submitted Electronically

# The Hub of Syracuse, Inc.

P.O. BOX 638-EAST HIGHWAY 50  
SYRACUSE, KANSAS 67878  
(620) 384-6914 FAX:(620) 384-7896

## Invoice

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**DATE:** 6/11/2010  
**COMPANY NAME:** BEREXCO, INC.  
808 S. FRONTAGE ROAD  
GARDEN CITY, KS 67846

**INVOICE NO.** W: 47321

**LEASE NAME:** PATTERSON #2-23  
(KE. CO.)

DESCRIPTION OF WORK/MATERIAL	HRS/QTY	RATE	AMOUNT
PUSHED LINER IN ON WORKING PIT AT WELL HEAD WHILE VACUUM TRUCK PULLED WATER OUT OF PIT, THEN STARTED BACKFILLING WORKING PIT. PAYLOADER CARRIED REMAINING MUD TO OFF SITE RESERVE PIT, BACKFILL WORKING PIT, DRESS OFF & RIP. THEN BACKFILLED OFF SITE RESERVE PIT, DRESSED OFF & BACKRIPPED.  D-6H DOZER W/OP CAT 950 G LOADER W/OP			

PERSONNEL:G. SMITH, JACOB A.