

**APPLICATION FOR SURFACE PIT***Submit in Duplicate*

Operator Name:		License Number:	
Operator Address:			
Contact Person:		Phone Number:	
Lease Name & Well No.:		Pit Location (QQQQ): ____ - ____ - ____ - ____	
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 <i>(If WP Supply API No. or Year Drilled)</i>		Pit is: <input type="checkbox"/> Proposed <input type="checkbox"/> Existing If Existing, date constructed: _____ Pit capacity: _____ (bbls)	
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input type="checkbox"/> No		Chloride concentration: _____ mg/l <i>(For Emergency Pits and Settling Pits only)</i>	
Is the bottom below ground level? <input type="checkbox"/> Yes <input type="checkbox"/> No		Artificial Liner? <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) <input type="checkbox"/> N/A: Steel Pits Depth from ground level to deepest point: _____ (feet) <input type="checkbox"/> 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: _____ feet    Depth of water well _____ feet		Depth to shallowest fresh water _____ feet. Source of information: <input type="checkbox"/> measured <input type="checkbox"/> well owner <input type="checkbox"/> electric log <input type="checkbox"/> KDWR	
<b>Emergency, Settling and Burn Pits ONLY:</b> Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ 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> Type of material utilized in drilling/workover: _____ Number of working pits to be utilized: _____ Abandonment procedure: _____ _____ Drill pits must be closed within 365 days of spud date.	
Submitted Electronically			

**KCC OFFICE USE ONLY**
 Liner     Steel Pit     RFAC     RFAS

 Date Received: \_\_\_\_\_ Permit Number: \_\_\_\_\_ Permit Date: \_\_\_\_\_ Lease Inspection:     Yes     No

## Summary of Changes

Lease Name and Number: Don Chrisler SWD 2

API/Permit #: 15-051-21076-00-01

Doc ID: 1076980

Correction Number: 1

Field Name	Previous Value	New Value
Feet to Nearest Water Well Within One-Mile of Pit	4441	4526
KCC Only - Date Received	03/20/2012	03/23/2012
KCC Only - Permit Date	03/21/2012	03/26/2012
KCC Only - Permit Number	15-051-02094-00-00	15-051-21076-00-01
KCC Only - Regular Section Quarter Calls	NE SE SW SE	SW SW SE
Lease Name	CHRISLER B	Don Chrisler SWD
LocationInfoLink	<a href="https://solar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=34&amp;t1545">https://solar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=34&amp;t1545</a>	<a href="https://solar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=34&amp;t2310">https://solar.kgs.ku.edu/kcc/detail/locationInformation.cfm?section=34&amp;t2310</a>
Number of Feet East or West From Section Line	1545	2310
Number of Feet North or South From Section Line	342	330
Quarter Call 3	SE	SW
Quarter Call 4 - Smallest	NE	

Summary of changes for correction 1 continued

Field Name	Previous Value	New Value
Save Link	../../../../kcc/detail/operatorEditDetail.cfm?docID=1076888	../../../../kcc/detail/operatorEditDetail.cfm?docID=1076980
Well Number	1	2
Workover Pit: API or Year Drilled	15-051-02094-00-00	15-051-21076-00-01