



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



**TOTAL LEASE
SERVICE, INC.**

1309 Toulon Ave. • Hays, KS 67601

INVOICE

OFF. (785) 735-9520

SHOP. (785) 735-2780

Date	Invoice #
3/1/2016	6583

Bill To
CARMEN SCHMITT PO BOX 49 GREAT BEND, KS 67530

COUNTY	LEASE
LANE	FRONTIER UNIT

QTY	HRS	DESCRIPTION	HRS/S	Servic...	Amount
2.5	BACKHOE-X/MAN	CUT OFF WELLHEAD AND FILLED PIT <i>710/53</i> <i>17819.0001</i>	142.00	2/25/2016	355.00

Subtotal	\$355.00
Sales Tax (7.5%)	\$0.00
Total	\$355.00