

**CLOSURE OF SURFACE PIT**

|                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Operator Name:                                                                                                                                                                                                                                             | License Number:                                                                                                                                                                                                                                                                                                                                                             |
| Operator Address:                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                             |
| Contact Person:                                                                                                                                                                                                                                            | Phone Number: (     )     -                                                                                                                                                                                                                                                                                                                                                 |
| Permit Number (API No. if applicable):                                                                                                                                                                                                                     | Lease Name & Well No.:                                                                                                                                                                                                                                                                                                                                                      |
| Type of Pit:<br><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 | Pit Location (QQQQ):<br><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 |
| 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

### Summary of Changes

Lease Name and Number: SCHMIDT 14-12 WSW

API/Permit #: 15-045-22277-00-00

Doc ID: 1296271

Correction Number: 1

| Field Name            | Previous Value                                        | New Value                                             |
|-----------------------|-------------------------------------------------------|-------------------------------------------------------|
| Approved Date         | 11/05/2015                                            | 03/15/2016                                            |
| Lease Well - Combined | SCHMIDT 14-12                                         | SCHMIDT 14-12 WSW                                     |
| Save Link             | ../../kcc/detail/operatorEditDetail.cfm?docID=1270300 | ../../kcc/detail/operatorEditDetail.cfm?docID=1296271 |
| Well Number           | 14-12                                                 | 14-12 WSW                                             |