



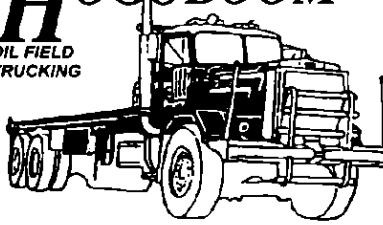
**CLOSURE OF SURFACE PIT**

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

767 OIL HILL ROAD  
EL DORADO, KANSAS 67042

Albert  
**HOGBOOM**  
OIL FIELD  
TRUCKING



PHONES  
EL DORADO • 316/321-1397  
FAX • 316/321-1396

CARMEN SCHMITT, INC  
P.O. BOX 47  
GREAT BEND, KS 67530

INVOICE NO. **5805**  
DATE **04/30/16**

Net 10

LEASE	JOST 1-29	CONTRACT NO.
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DATE	DESCRIPTION	HOURS	RATE	AMOUNT
	MARION CO			
	4-25 PUSHED PITS, STARTED PUSHING HILLSIDE BACK			
	D6 DOZER 311	12	127.00	1524.00
	4-26 PUSHED HILLSIDE BACK			
	D6 DOZER 311	8	127.00	1016.00
	Invoice subtotal			2540.00
	Invoice total			2540.00

7/3/53  
19039.0129

Well site  
closed pits

Please Pay From This Invoice  
Statement will be sent on request

TERMS: NET 10 DAYS From Date of Invoice. A Service Charge of 1½% Will be Added to Past Due Accounts.  
(Effective Rate 18% Per Annum)