Kansas Corporation Commission Oil & Gas Conservation Division

Form CDP-4 April 2004 Form must be Typed

CLOSURE OF SURFACE PIT

Operator Name: IA Operating, Inc.	License Number: 33335
Operator Address: 9915 W. 21st Street, Ste B Wichita, KS 67205	
Contact Person: Hal Porter	Phone Number: (316) 721 - 0036
Permit Number (API No. if applicable): 15-051-25657-0000	Lease Name & Well No.: D & S Farms 15-1
Type of Pit:	Pit Location (QQQQ):
Emergency Pit Burn Pit	<u>SW _ NW _ NW</u>
Settling Pit	Sec. 15 Twp. 11 R. 16 ☐ East ✓ West
Workover Pit Haul-Off Pit	1220 Feet from North / South Line of Section
	530 Feet from East / West Line of Section
	Ellis County
Date of closure: 05/15/08 Was an artificial liner used? Yes No If no, how were the sides and bottom sealed to prevent downward migration of the pit contents? RECEIVED KANSAS CORPORATION COMMISSIS MAY 2 1 2008 Abandonment procedure of pit: Allowed to dry,then backfilled.	
	KANSAS CORPORATION COMMISSI MAY 2 1 2008 CONSERVATION DIVISION
Allowed to dry,then backfilled.	MAY 2 1 2008 CONSERVATION DIVISION WICHITA, KS
Allowed to dry,then backfilled. The undersigned hereby certifies that he / she is President	MAY 2 1 2008 CONSERVATION DIVISION WICHITA, KS IA Operating, Inc. (Co.),
Allowed to dry,then backfilled.	MAY 2 1 2008 CONSERVATION DIVISION WICHITA, KS IA Operating, Inc. (Co.),
Allowed to dry,then backfilled. The undersigned hereby certifies that he / she is President	MAY 2 1 2008 CONSERVATION DIVISION WICHITA, KS for IA Operating, Inc. (Co.), e pess of his /her knowledge and belief.
Allowed to dry,then backfilled. The undersigned hereby certifies that he / she is President a duly authorized agent, that all information shown hereon is true and correct to the	MAY 2 1 2008 CONSERVATION DIVISION WICHITA, KS for IA Operating, Inc. (Co.), e pest of his /her knowledge and belief. Signature of Applicant or Agent
Allowed to dry,then backfilled. The undersigned hereby certifies that he / she is President	MAY 2 1 2008 CONSERVATION DIVISION WICHITA, KS for IA Operating, Inc. (Co.), e pest of his /her knowledge and belief. Signature of Applicant or Agent