

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
CLOSURE OF SURFACE PIT**

Form CDP-4
April 2004
Form must be Typed

Operator Name: Kansas Natural Gas Operating, Inc.	License Number: 32787
Operator Address: P.O. Box 815 Sublette, KS 67877	
Contact Person: Steve Lehning	Phone Number: (620) 675 - 8185
Permit Number (API No. if applicable): (Small pit) 15-055-21955-0000	Lease Name & Well No.: Hamlin 6-3
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit <input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit (Small Working Pit On-Site)	Pit Location (QQQQ): SE - NW - SE - 1/4 Sec. 29 Twp. 24 R. 34 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 1472' Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 1745' Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section Finney County County
Date of closure: <u>December 6th, 2007</u>	
Was an artificial liner used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If no, how were the sides and bottom sealed to prevent downward migration of the pit contents? Pit was allowed to evaporate till dry then backfilled to complete.	
Abandonment procedure of pit: Evaporate till dry, backfill and spread manure.	
<div style="border: 1px solid black; padding: 5px; transform: rotate(-10deg); display: inline-block;"> RECEIVED KANSAS CORPORATION COMMISSION DEC 14 2007 CONSERVATION DIVISION WICHITA, KS </div>	
The undersigned hereby certifies that he / she is _____ Supt. _____ for Kansas Natural Gas Operating, Inc. (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his /her knowledge and belief.	
_____ Steve Lehning, Supt. _____ Signature of Applicant or Agent	
Subscribed and sworn to me on this <u>11th</u> day of <u>December</u> , <u>2007</u>	
_____ Kraig L. Gross _____ Notary Public	
My Commission Expires: _____ <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-top: 5px;"> KRAIG L. GROSS NOTARY PUBLIC STATE OF KANSAS My Appl. Exp. 5-8-10 </div>	