


**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): 15-081-21846-0000	Lease Name & Well No.: Daniels 1-3
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	Pit Location (QQQQ): NE _ SW _ SW _ 1/4 Sec. <u>25</u> Twp. <u>29</u> R. <u>33</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West 1260' Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 1210' Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Haskell _____ County
Date of closure: <u>1-22-09</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? Fresh water and drilling mud. Evaporate till dry and backfill to complete.	
Abandonment procedure of pit: Evaporate till dry. Backfill to complete. Spread manure.	
RECEIVED KANSAS CORPORATION COMMISSION JAN 26 2009 CONSERVATION DIVISION WICHITA, KS	
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.	
_____ Signature of Applicant or Agent	
Subscribed and sworn to me on this <u>23rd</u> day of <u>January</u> , <u>2009</u>	
	_____ Notary Public
My Commission Expires: <u>10-1-2009</u>	