
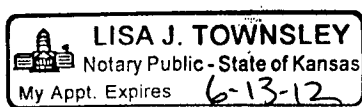
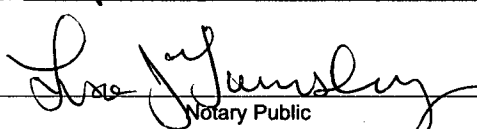


**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
CLOSURE OF SURFACE PIT**

Form CDP-4
April 2004
Form must be Typed

Operator Name: Lone Wolf Oil	License Number: 31119
Operator Address: Box 241	
Contact Person: Rob Wolfe	Phone Number: (620) 647 - 3626
Permit Number (API No. if applicable): 019 26935 0000	Lease Name & Well No.: Walker Trust 5
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): N/2 - N/2 - NE - NE Sec. <u>1</u> Twp. <u>32</u> R. <u>9</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West 165 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 660 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section _____ County
Date of closure: <u>3-2-09</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? yes clay	
Abandonment procedure of pit: Evaporation- Fill with soil	
RECEIVED KANSAS CORPORATION COMMISSION MAR 30 2009 CONSERVATION DIVISION WICHITA, KS	
The undersigned hereby certifies that he / she is <u>President</u> for <u>Lone Wolf Oil</u> (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>27th</u> day of <u>March</u> , <u>2009</u>	
	 _____ Notary Public
My Commission Expires: <u>6.13.12</u>	