
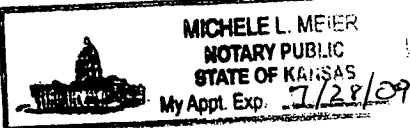
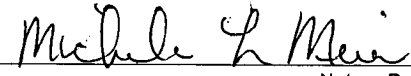


KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
CLOSURE OF SURFACE PIT

Form CDP-4
April 2004
Form must be Typed

Operator Name: Downing Nelson Oil Co., Inc	License Number: 30717
Operator Address: P.O. Box 372, Hays, KS 67601	
Contact Person: Ron Nelson	Phone Number: (785) 621 - 2610
Permit Number (API No. if applicable): 15-051-25726-00 00 195-22,726-0000	Lease Name & Well No.: Augustine #2-19
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): _____ <u>SE</u> _____ <u>SW</u> _____ <u>SE</u> Sec. <u>19</u> Twp. <u>13s</u> R. <u>20</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>460</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>1750</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section ELLIS _____ County
Date of closure: <u>04/28/08</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? Sealed with clay soil, native and fresh mud.	
Abandonment procedure of pit: Allow liquid contents to evaporate, let cutting dry and backfill.	
RECEIVED KANSAS CORPORATION COMMISSION MAY 12 2008 CONSERVATION DIVISION WICHITA, KS	
The undersigned hereby certifies that he / she is _____ a duly authorized agent _____ for <u>Downing Nelson Oil Co., Inc</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>1st</u> day of <u>May</u> , <u>2008</u>	
	 _____ Notary Public
My Commission Expires: <u>7/28/09</u>	