

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

Form CDP-4  
April 2004  
Form must be Typed

Operator Name: <b>Layne Energy Operating, LLC</b>	License Number: <b>33365</b>
Operator Address: <b>1900 Shawnee Mission Parkway, Mission Woods, KS 66205</b>	
Contact Person: <b>Kimberlee Dixon</b>	Phone Number: ( <b>620</b> ) <b>627 - 2499</b>
Permit Number (API No. if applicable): <b>15-125-31530-0000</b>	Lease Name & Well No.: <b>Isle 5-9</b>
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): <b>SW</b> <b>NW</b> Sec. <u>9</u> Twp. <u>34s</u> R. <u>16</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>1671</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>926</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>Montgomery</u> County

Date of closure: June 3, 2009

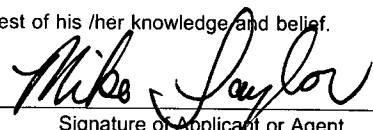
Was an artificial liner used?    Yes     No

If no, how were the sides and bottom sealed to prevent downward migration of the pit contents?  
**Self-Sealing Pit**

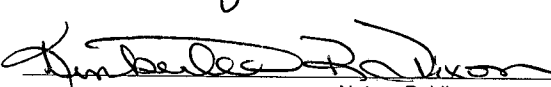
Abandonment procedure of pit:  
**Let evaporate until dry, then backfilled and restored.**

RECEIVED  
 JUN 15 2009  
 KCC WICHITA

The undersigned hereby certifies that he / she is \_\_\_\_\_ **Agent** \_\_\_\_\_ for **Layne Energy Operating, LLC** (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 10<sup>th</sup> day of June, 2009.

  
 \_\_\_\_\_  
 Notary Public

**KIMBERLEE R. DIXON**  
 NOTARY PUBLIC  
 My Appt. Exp. 5-7-2012  
**STATE OF KANSAS**

My Commission Expires: May 7, 2012