

KANSAS CORPORATION COMMISSION
OIL AND GAS CONSERVATION DIVISION

Form CDP-4
April 2004
Form must be typed

CLOSURE OF SURFACE PIT

Operator Name: LARSON ENGINEERING, INC.	License Number: 3842
Operator Address: 562 WEST STATE ROAD 4 OLMITZ, KS 67564-8561	
Contact Person: TOM LARSON	Phone Number: (620) 653-7368
Permit Number (API No. if applicable): 15-101-22112-00-00	Lease Name & Well No. DORIS 1-16
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): ____ - ____ - ____ - ____ Sec. <u>16</u> Twp. <u>17S</u> R. <u>28</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>737</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>2310</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section ____ LANE _____ County

Date of closure: JULY 31, 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?

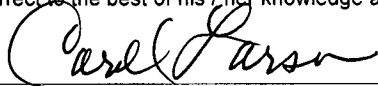
NATIVE MUD & CLAY

Abandonment procedure of pit:


ALLOWED TO DRY, THEN BACKFILLED

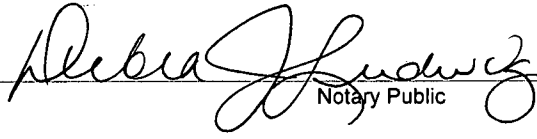
KANSAS CORPORATION COMMISSION
AUG 05 2009
RECEIVED

The undersigned hereby certifies that he / she is SECRETARY/TREASURER for LARSON ENGINEERING, 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 4TH day of AUGUST, 2009

 **DEBRA J. LUDWIG**
Notary Public - State of Kansas
My Appt. Expires 5/5/2012


Notary Public

My Commission Expires: MAY 5, 2012