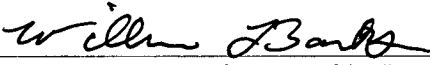
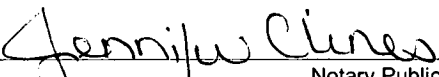
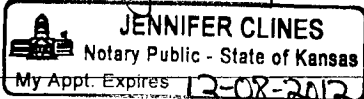


KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-4
April 2004
Form must be Typed

CLOSURE OF SURFACE PIT

Operator Name: Dart Cherokee Basin Operating Co. LLC	License Number: 33074
Operator Address: 211 W. Myrtle, Independence, KS 67301	
Contact Person: Bill Barks	Phone Number: (620) 331 - 7870
Permit Number (API No. if applicable): 15-125-31703-00-00	Lease Name & Well No.: G&M Lewman Trust D1-1
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>NE</u> _____ <u>SW</u> _____ <u>SW</u> Sec. <u>1</u> Twp. <u>33S</u> R. <u>13</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>780</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>4350</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section _____ County
Date of closure: <u>9/25/09</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? Natural Clay	
Abandonment procedure of pit: Air Dry and Backfill	
RECEIVED SEP 30 2009 KCC WICHITA	
The undersigned hereby certifies that he / she is _____ Operations Manager _____ for Dart Cherokee Basin Operating (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>29th</u> day of <u>September</u> , 2009	
 _____ Notary Public	
	
My Commission Expires: _____	