Kansas Corporation Commission Oil & Gas Conservation Division

Form CDP-4 April 2004 Form must be Typed

CLOSURE OF SURFACE PIT

Operator Name: Town Oil Company, Inc.	License Number: 6142
Operator Address: 16205 West 287th St. Paola, Kansas	66071
Contact Person: Lester Town	Phone Number: (913) 294 - 2125
Permit Number (API No. if applicable): 15-045-21536-00-00	Lease Name & Well No.: Johnson 2-09
Type of Pit:	Pit Location (QQQQ):
Emergency Pit Burn Pit	SW NW SE NW
Settling Pit Drilling Pit	Sec. 1 Twp. 15 R. 20 X East West
Workover Pit Haul-Off Pit	
	Feet from X East / West Line of Section
	Douglas County
Date of closure: 8-20-09	
Was an artificial liner used? Yes X No	
If no, how were the sides and bottom sealed to prevent downward migration of the	pit contents?
Used drilling mud	Dron
	KECEIVED
Abandonment procedure of pit:	AUG 2 6 2009
	KCO
	NCC WICHITA
Air dried and filled with dirt.	RECEIVED AUG 2 6 2009 KCC WICHITA
Air dried and filled with dirt.	NCC WICHITA
The undersigned hereby certifies that XX she isAgent	forTown Oil Company, Inc. (Co.),
	forTown Oil Company, Inc. (Co.),
The undersigned hereby certifies that XX she isAgent	forTown Oil Company, Inc. (Co.),
The undersigned hereby certifies that XX she isAgent a duly authorized agent, that all information shown hereon is true and correct to the	tor Town Oil Company, Inc. (Co.), the best of his /her knowledge and belief.
The undersigned hereby certifies that XX she isAgent	tor Town Oil Company, Inc. (Co.), the best of his /her knowledge and belief.
The undersigned hereby certifies that XX she isAgent a duly authorized agent, that all information shown hereon is true and correct to the	tor Town Oil Company, Inc. (Co.), the best of his /her knowledge and belief.
The undersigned hereby certifies that XX she isAgent a duly authorized agent, that all information shown hereon is true and correct to the	tor Town Oil Company, Inc. (Co.), the best of his /her knowledge and belief.
The undersigned hereby certifies that XX/ she isAgenta duly authorized agent, that all information shown hereon is true and correct to the	tor Town Oil Company, Inc. (Co.), the best of his /her knowledge and belief.
The undersigned hereby certifies that XX/ she isAgenta duly authorized agent, that all information shown hereon is true and correct to the	for Town Oil Company, Inc. (Co.), the best of his /her knowledge and belief. Letta Journ Signature of Applicant of Agent August Check Notary Public