## Kansas Corporation Commission Oil & Gas Conservation Division

Form CDP-4 April 2004 Form must be Typed

## **CLOSURE OF SURFACE PIT**

Operator Name: Indian Oil Co., Inc.	License Number: 31938
Operator Address: PO Box 209, Medicine Lodge, KS 67104	
Contact Person: Anthony Farrar	Phone Number: ( 620 ) 886 - 3763
Permit Number (API No. if applicable): 15-047-20093- $\infty$ - $\infty$	Lease Name & Well No.: Russell 1-8
Type of Pit:	Pit Location (QQQQ):
Emergency Pit Burn Pit	<u>C</u> <u>SE</u> <u>SW</u>
Settling Pit Drilling Pit	Sec. 8 Twp. 24 R. 16 East  West
✓ Workover Pit ☐ Haul-Off Pit	660 Feet from North / ✓ South Line of Section
	3300 Feet from ✓ East / West Line of Section
	Edwards County
Date of closure: 01/30/2009  Was an artificial liner used? Yes No  If no, how were the sides and bottom sealed to prevent downward migration of the pit contents?  Natural Clay	
Abandonment procedure of pit: Allowed to evaporate; backfill per KCC regulations.	RECEIVED  MAR 1 1 2009  KCC WICHITA
The undersigned hereby certifies that he / she is Secretary/Treasurer for Indian Oil Co., 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	
a duly authorized agent, that all information shown hereon is true and correct to the	e best of his /her knowledge and belief.
a duly authorized agent, that all information shown hereon is true and correct to the	e best of his /her knowledge and belief.  Signature of Applicant or Agent
Subscribed and sworn to me on this day of	e best of his /her knowledge and belief.  Signature of Applicant or Agent