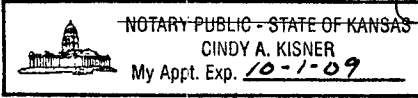


**KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
CLOSURE OF SURFACE PIT**

Form CDP-4  
April 2004  
Form must be Typed

Operator Name: <b>Kansas Natural Gas Operating, Inc.</b>	License Number: <b>32787</b>
Operator Address: <b>P.O. Box 815 Sublette, KS 67877</b>	
Contact Person: <b>Steve Lehning</b>	Phone Number: ( <b>620</b> ) <b>675 - 8185</b>
Permit Number (API No. if applicable): <b>15-055-21951-0000</b>	Lease Name & Well No.: <b>Hamlin 7-3</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  (Off-Site Reserve Pit)	Pit Location (QQQQ):  <b>NE - NE - NW - 1/4</b>  Sec. <u>06</u> Twp. <u>25</u> R. <u>34</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West  150 _____ Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section  2490 _____ Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section  Finney _____ County
Date of closure: <u>February 27, 2008</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? <b>Fresh water and drilling mud. Allowed to evaporate till dry and backfill to complete.</b>	
Abandonment procedure of pit: <b>Evaporate till dry. Backfill to complete.</b>	RECEIVED KANSAS CORPORATION COMMISSION  <b>MAR 03 2008</b>  CONSERVATION DIVISION WICHITA, KS
The undersigned hereby certifies that he / she is _____ Supt. _____ for <b>Kansas Natural Gas Operating, Inc.</b> (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>20th</u> day of <u>February</u> , <u>2008</u>	
 _____ Notary Public	
My Commission Expires: _____	