

**KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
APPLICATION FOR SURFACE PIT**

Form CDP-1  
April 2004  
Form must be Typed

*Submit in Duplicate*

Operator Name: <b>Thomason Petroleum Inc.</b>		License Number: <b>9957</b>
Operator Address: <b>Box 875, Hays Kansas 67601</b>		
Contact Person: <b>Steven Thomason</b>		Phone Number: <b>785-625-9045</b>
Lease Name & Well No.: <b>Desair #2</b>		Pit Location (QQQQ): _____ <b>NE</b> _____ <b>SW</b> _____ <b>SW</b> Sec. <u>1</u> Twp. <u>10</u> R. <u>21</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>990</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>915</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <b>Graham</b> _____ County
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit <small>(If WP Supply API No. or Year Drilled)</small>	Pit is: <input type="checkbox"/> Proposed <input checked="" type="checkbox"/> Existing If Existing, date constructed: <u>3/19/2008</u> Pit capacity: <u>200</u> (bbls)	
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Chloride concentration: _____ mg/l <small>(For Emergency Pits and Settling Pits only)</small>
Is the bottom below ground level? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Artificial Liner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	How is the pit lined if a plastic liner is not used?
Pit dimensions (all but working pits): <u>10</u> Length (feet) <u>8</u> Width (feet) <input type="checkbox"/> N/A: Steel Pits Depth from ground level to deepest point: <u>5</u> (feet) <input type="checkbox"/> No Pit		
If the pit is lined give a brief description of the liner material, thickness and installation procedure. <b>Plastic 6 mil. Lined top to bottom</b>		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring. <b>Looking for fluid loss</b> <div style="text-align: right;"><b>RECEIVED</b> KANSAS CORPORATION COMMISSION <b>JUL 21 2008</b> CONSERVATION DIVISION WICHITA, KS</div>
Distance to nearest water well within one-mile of pit <u>na</u> feet    Depth of water well _____ feet	Depth to shallowest fresh water <u>1,000</u> feet. Source of information: <input type="checkbox"/> measured <input type="checkbox"/> well owner <input type="checkbox"/> electric log <input checked="" type="checkbox"/> KDWR	
<b>Emergency, Settling and Burn Pits ONLY:</b> Producing Formation: _____ Number of producing wells on lease: _____ Barrels of fluid produced daily: _____ Does the slope from the tank battery allow all spilled fluids to flow into the pit? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Drilling, Workover and Haul-Off Pits ONLY:</b> Type of material utilized in drilling/workover: <u>Fresh water</u> Number of working pits to be utilized: <u>1</u> Abandonment procedure: <u>Backfilled</u> Drill pits must be closed within 365 days of spud date.	
I hereby certify that the above statements are true and correct to the best of my knowledge and belief.  <u>6/6/2008</u> _____ Date    Signature of Applicant or Agent		

<b>KCC OFFICE USE ONLY</b>		Steel Pit <input type="checkbox"/>	RFAC <input type="checkbox"/>	RFAS <input type="checkbox"/>
Date Received: <u>7/21/08</u>	Permit Number: <u>15-065-23367-0000</u>	Permit Date: <u>7/21/08</u>	Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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

Form CDP-4  
April 2004  
Form must be Typed

Operator Name: <b>Thomason Petroleum Inc.</b>	License Number: <b>9957</b>
Operator Address: <b>Box 875 Hays, Kansas 67601</b>	
Contact Person: <b>Steven Thomason</b>	Phone Number: ( <b>785</b> ) <b>625</b> - <b>9045</b>
Permit Number (API No. if applicable): <b>NA 15-065-23367</b>	Lease Name & Well No.: <b>Desair #2</b>
Type of Pit:  <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit	Pit Location (QQQQ):  _____ <b>NE</b> _____ <b>SW</b> _____ <b>SW</b> Sec. <u>1</u> Twp. <u>10</u> R. <u>21</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>990</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>915</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>Graham</u> _____ County

Date of closure: 3/27/2008

Was an artificial liner used?  Yes     No

If no, how were the sides and bottom sealed to prevent downward migration of the pit contents?

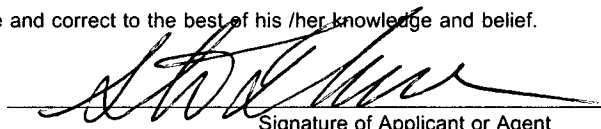
Abandonment procedure of pit:  
**Back Filled**

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**JUL 21 2008**

CONSERVATION DIVISION  
WICHITA, KS

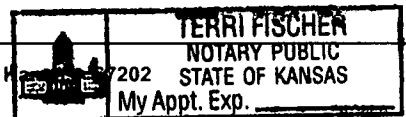
The undersigned hereby certifies that he she is Steven Thomason for Thomason Petroleum Inc. (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his /her knowledge and belief.

  
 \_\_\_\_\_  
 Signature of Applicant or Agent

Subscribed and sworn to me on this 17 day of July, 2008

Jeni Fischer  
 \_\_\_\_\_  
 Notary Public

My Commission Expires: 12.15.2010



**KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
EXPLORATION & PRODUCTION WASTE TRANSFER**

Form CDP-5  
August 2004  
Form must be Typed

Operator Name: <b>Thomason Petroleum Inc.</b>		License Number: <b>9957</b>
Operator Address: <b>Box 875, Hays Kansas 67601</b>		
Contact Person: <b>Steven Thomason</b>		Phone Number: ( <b>785</b> ) <b>625</b> - <b>9045</b>
Permit Number (API No. if applicable): <b>na 15-06S-23367</b>		Lease Name: <b>Desair #2</b>
Source of Waste: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Dike <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Drilling Pit <input type="checkbox"/> Steel Pit <input type="checkbox"/> Haul-off Pit <input type="checkbox"/> <input type="checkbox"/> Spill / Escape		Well Number:  Source Location (QQQQ): _____ - <u>NE</u> - <u>SW</u> - <u>SW</u> Sec. <u>2</u> Twp. <u>10</u> R. <u>21</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West 990 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 915 Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section _____ County
Type of waste to be disposed: <input checked="" type="checkbox"/> Fluid <input type="checkbox"/> Soil <input type="checkbox"/> Mud / Cuttings <input type="checkbox"/> Other: _____		
Amount of waste: <u>1</u> No. of loads <u>80</u> Barrels    _____ Tons    _____ YDS		
Destination of waste: <input type="checkbox"/> Reserve Pit <input checked="" type="checkbox"/> Disposal Well <input type="checkbox"/> Lease Road <input type="checkbox"/> Dike / Berm <input type="checkbox"/> Other: _____		
If waste is transferred to another reserve pit, is the lease active? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Location of waste disposal:		Date of Waste Transfer: <u>3/27/2008</u>
Operator Name: <u>Thomason Petroleum Inc.</u>		License No.: <u>9957</u>
Lease Name: <u>Whisman</u>		Sec. <u>9</u> Twp. <u>9</u> R. <u>20</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West
Docket No.: <u>D-20,294</u>		County: <u>Rooks</u>

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KANSAS CORPORATION COMMISSION  
**JUL 21 2008**  
CONSERVATION DIVISION  
WICHITA, KS

The undersigned hereby certifies that he / she is Steven Thomason  
for Thomason Petroleum Inc. (Co.), a duly authorized agent, that all information shown hereon is true

and correct to the best of his / her knowledge and belief.

Subscribed and sworn to before me on this 17 day of July, 2008

*[Handwritten Signature]*  
Agent Signature

Terri Fischer  
Notary Public

My Commission Expires: 12.15.2010

