

**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: <u>Walker Tank Service Inc</u>		License Number: <u>4313</u>
Operator Address: <u>Po 117 Utica Ks 67584</u>		
Contact Person: <u>Joann Walker</u>		Phone Number: <u>785-391-2408</u>
Lease Name & Well No.: <u>Thon #1</u>		Pit Location (QQQQ): <u>sw - ne - nw - 1/4</u>
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> <u>81-1978</u>	Pit is: <input type="checkbox"/> Proposed <input checked="" type="checkbox"/> Existing If Existing, date constructed: <u>2/14/08</u> Pit capacity: <u>1000</u> (bbls)	Sec. <u>10</u> Twp. <u>17</u> R. <u>29</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>990</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>955</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Lane _____ County _____
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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	How is the pit lined if a plastic liner is not used?
Pit dimensions (all but working pits): <u>80</u> Length (feet) <u>21</u> Width (feet) <input type="checkbox"/> N/A: Steel Pits Depth from ground level to deepest point: <u>6</u> (feet) <input type="checkbox"/> No Pit		
If the pit is lined give a brief description of the liner material, thickness and installation procedure.		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring. <p align="center">RECEIVED KANSAS CORPORATION COMMISSION FEB 26 2008</p>
Distance to nearest water well within one-mile of pit <u>175</u> feet Depth of water well <u>185</u> feet	Depth to shallowest fresh water <u>119</u> CONSERVATION DIVISION WICHITA, KS Source of information: <input type="checkbox"/> measured <input type="checkbox"/> well owner <input type="checkbox"/> electric log <input type="checkbox"/> KDWR	
Emergency, Settling and Burn Pits ONLY: 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	Drilling, Workover and Haul-Off Pits ONLY: Type of material utilized in drilling/workover: <u>water</u> Number of working pits to be utilized: <u>1</u> Abandonment procedure: <u>Empty & cover</u> <p align="center">RECEIVED KANSAS CORPORATION COMMISSION</p>	
I hereby certify that the above statements are true and correct to the best of my knowledge and belief.		FEB 19 2008
<u>2-16-08</u> Date <u>2-28-08</u>	<u>Joann Walker</u> Signature of Applicant or Agent	CONSERVATION DIVISION WICHITA, KS

15101203210001

KCC OFFICE USE ONLY		Steel Pit <input type="checkbox"/>	RFAC <input type="checkbox"/>	RFAS <input type="checkbox"/>
Date Received: <u>2/26/08</u>	Permit Number: <u>15-101-203210001</u>	Permit Date: <u>2/18/08</u>	Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

WORKOVER PIT APPLICATION
VERBAL AUTHORIZATION

DATE: 2-13-08 TIME: 1:10 785-391-2408
OPERATOR: WALKER TANK SERVICE CONTACT PERSON: JOANN WALKER
WELL NAME: JOHN #1
SW NE NW SEC. 10 TWP. 17 RANGE 29 W COUNTY: LANE

CONSTRUCTION:

SIZE: WIDTH _____ LENGTH _____ DEPTH _____
ESTIMATED CAPACITY 1000 BBLS (DOUBLE WIDE)

EST. DEPTH TO GROUNDWATER (if known): _____
TYPE OF FLUID: Saltwater _____ Workover Fluids (THIS IS FOR SWABBED WELLS)
 Cement _____ Drilling Mud/Cuttings THIS IS FOR SWABBED

DOES OPERATOR PLAN TO LINE PIT: _____ YES NO
ESTIMATED TIME BEFORE PIT WILL BE CLOSED: ? Days THIS IS FOR SWABBED
ANY KNOWN WATER WELLS WITHIN 1/4 MILE OF PIT: YES FLUIDS FROM THEIR DISPOSAL
WHICH GOT SOME "GUNK
AND SLUDGE" IN IT
ACCIDENTALLY.
NO IRRIGATION

K.C.C. INFORMATION: IS PIT IN SGA? _____ YES NO

K.C.C. DISTRICT #1 RECOMMENDATION (Check One):

- 1. Authorization granted with no liner.
- 2. Authorization granted, if pit is lined.
- 3. Authorization granted, no liner necessary, but free fluids must be removed within _____ hours of completion of workover/plugging operations.
- 4. No verbal authorization will be given without on-site inspection.

*Remind operator that pit permit form must be filed within five (5) days after verbal authorization.

RESULTS OF INSPECTION:

MA

RECEIVED
KANSAS CORPORATION COMMISSION

FEB 19 2008

CONSERVATION DIVISION
WICHITA, KS

LR/SD Agent Date 2-14-08