## Kansas Corporation Commission Oil & Gas Conservation Division

Form CDP-4 April 2004 Form must be Typed

## **CLOSURE OF SURFACE PIT**

| Operator Name: TDR Construction, Inc.                                                                                                                           | License Number: 32218                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| Operator Address: PO Box 339 Louisburg, KS 66053                                                                                                                |                                                |
| Contact Person: Lori Driskell                                                                                                                                   | Phone Number: ( 913 ) 837 - 8400               |
| Permit Number (API No. if applicable): 15-059-25525-00-00                                                                                                       | Lease Name & Well No.: Duffy # 31              |
| Type of Pit:                                                                                                                                                    | Pit Location (QQQQ):                           |
| Emergency Pit Burn Pit                                                                                                                                          | SW NW SE SW                                    |
| Settling Pit                                                                                                                                                    | Sec. 32 _ Twp. 15 _ R. 21 _ ✓ East _ West      |
| Workover Pit Haul-Off Pit                                                                                                                                       | 815 Feet from North / South Line of Section    |
|                                                                                                                                                                 | 3795 Feet from 🗸 East / 🗌 West Line of Section |
|                                                                                                                                                                 | Franklin County                                |
| Date of closure: 1/4/2011  Was an artificial liner used? Yes No  If no, how were the sides and bottom sealed to prevent downward migration of the pit contents? |                                                |
| Use Drilling Mud                                                                                                                                                | pit contents:                                  |
|                                                                                                                                                                 |                                                |
|                                                                                                                                                                 | RECEIVED                                       |
| Abandonment procedure of pit:                                                                                                                                   | JAN 1 0 2011                                   |
| Air dry and fill with dirt.                                                                                                                                     | KCC WICHITA                                    |
|                                                                                                                                                                 |                                                |
|                                                                                                                                                                 |                                                |
| ·                                                                                                                                                               |                                                |
| The undersigned hereby certifies that he / she is Agent                                                                                                         | forfor(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   |                                                |
| NOTARY PUBLIC - State of Kansas  LESLI STUTEVILLE  My Appt. Exp. 10-14-14  My Commission Expires: 10-14-14                                                      |                                                |