

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

Form CDP-4
 April 2004
 Form must be Typed

Operator Name: <u>Schankie Well Service, Inc.</u>	License Number: <u>6470</u>
Operator Address: <u>PO Box 397, 1006 SW Boulevard Madison, KS 66860</u>	
Contact Person: <u>Cliff Schankie</u>	Phone Number: <u>(620) 437-2595</u>
Permit Number (API No. if applicable): <u>15-073-24148</u> ⁰⁰⁰⁰ ₀₀₀₀	Lease Name & Well No.: <u>Shull #6</u>
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	Pit Location (QQQQ): <u>W2</u> - <u>SE</u> - <u>SE</u> - <u>SE</u> Sec. <u>21</u> Twp. <u>23</u> R. <u>11</u> <input checked="" type="checkbox"/> East <input type="checkbox"/> West <u>330</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>560</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Greenwood</u> County

Date of closure: 9-24-10

Was an artificial liner used? Yes No

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


Native Clay

Abandonment procedure of pit:

The undersigned hereby certifies that he / she is Randall Schankie, Sec for Schankie Well Ser, Inc., a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief.

Randall Schankie, Sec
 Signature of Applicant or Agent

Subscribed and sworn to me on this 7th day of April, 2011.

 **RACHEL D. BALLARD**
 Notary Public - State of Kansas
 My Appt. Expires 5-20-2014

Rachel Ballard
 Notary Public

My Commission Expires: May 20, 2014

RECEIVED
 APR 08 2011