

15-159-01017-0000

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form CDP-1  
May 2010  
Form must be Typed

APPLICATION FOR SURFACE PIT

Submit in Duplicate

Operator Name: Daystar Petroleum, Inc.		License Number: 30931	
Operator Address: PO Box 360, Valley Center, Kansas 67147-0360			
Contact Person: Steve Bodine		Phone Number: 620-792-6702	
Lease Name & Well No.: Newkirk #3		Pit Location (QQQQ): _____ NW _____ SE _____ NE	
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> 15-159-01-017-00-00		Pit is: <input type="checkbox"/> Proposed <input checked="" type="checkbox"/> Existing If Existing, date constructed: 01/17/2011 Pit capacity: 80 _____ (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	
Pit dimensions (all but working pits):    8 _____ Length (feet)    10 _____ Width (feet)		<input type="checkbox"/> N/A: Steel Pits	
Depth from ground level to deepest point:    6 _____ (feet)		<input type="checkbox"/> No Pit	
If the pit is lined give a brief description of the liner material, thickness and installation procedure.  Poly liner, 6 mil, draped in pit, over lapped on surface.		Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring.  Monitor pit level daily for loss.	
Distance to nearest water well within one-mile of pit: - 3302 _____ feet    Depth of water well    97 _____ feet		Depth to shallowest fresh water    64 _____ 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:    Fresh Water Number of working pits to be utilized:    1 Abandonment procedure:    Empty and back fill 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.		<b>RECEIVED</b> <b>JAN 19 2011</b> <b>KCC WICHITA</b>	
_____ 01/17/2011 Date		_____ <i>Steve Bodine</i> Signature of Applicant or Agent	
<b>KCC OFFICE USE ONLY</b>			
<input type="checkbox"/> Liner <input type="checkbox"/> Steel Pit <input type="checkbox"/> RFAC <input type="checkbox"/> RFAS			
Date Received: 1-19-11    Permit Number: 15-159-01017-0000    Permit Date: 1-20-11    Lease Inspection: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			