

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

Form CDP-4  
April 2004  
Form must be Typed

Operator Name: <b>JASON OIL COMPANY, LLC</b>	License Number: <b>33813</b>
Operator Address: <b>PO BOX 701 RUSSELL KANSAS 67665</b>	
Contact Person: <b>JAMES SCHOENBERGER</b>	Phone Number: <b>( 785 ) 483 - 4204</b>
Permit Number (API No. if applicable): <b>15-009-253630000</b>	Lease Name & Well No.: <b>WIRTH #5</b>
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): _____ Sec. <u>8</u> Twp. <u>16</u> R. <u>11</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>1980</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <b>BARTON</b> _____ County

Date of closure: 06/21/04

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:  
**ALLOW TO EVAPORATE AND BACKFILL LOCATION.**

The undersigned hereby certifies that he / she is \_\_\_\_\_ **AGENT** \_\_\_\_\_ for **JASON OIL COMPANY, LLC** (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his /her knowledge and belief.

Amber Mousco  
Signature of Applicant or Agent

Subscribed and sworn to me on this 20<sup>th</sup> day of January 2014

Fred Weigel, Jr.  
Notary Public

My Commission Expires: 7-18-2014

**KCC WICHITA**  
**JAN 22 2014**  
**RECEIVED**