## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form CDP-4 April 2004 Form must be Typed

## **CLOSURE OF SURFACE PIT**

Operator Name: Double 7 Oil and Gas LLC.	
Operator Name. Double / Oil and Gas LLC.	License Number: 32756
Operator Address: 21003 Wallace Rd Parsons Ks. 67357	
Contact Person: Bruce Schulz	Phone Number: ( 620 ) 423 - 0951
Permit Number (API No. if applicable): 15-099-24571 0000	Lease Name & Well No.: Manners Hichory #2
Type of Pit:	Pit Location (QQQQ):
Emergency Pit Burn Pit	<u>nw _ sw _ ne </u>
Settling Pit	Sec. 3 Twp. 31 R. 21
Workover Pit Haul-Off Pit	3340 Feet from North / ✓ South Line of Section
	2470 Feet from 🗸 East / West Line of Section
	<u>Labette</u> County
Was an artificial liner used? ☐ Yes ☑ No  no, how were the sides and bottom sealed to prevent downward migration of the pit contents?  Clay	
Abandonment procedure of pit:	KCC WICHITA
Abandonment procedure of pit: Pit was dry, Filled with top soil	KCC WICHITA
·	FEB 18 2014
•	
•	FEB 18 2014
Pit was dry, Filled with top soil	FEB 18 2014  RECEIVED  for Dabl= 70il+695 (co.),
The undersigned hereby certifies that he / she is Brace Schuls—a duly authorized agent, that all information shown hereon is true and correct to the	FEB 18 2014  RECEIVED  for Dabl= 70il+ Gas (co.), a best of his /her knowledge and belief.
The undersigned hereby certifies that he / she is Brace Schuls— a duly authorized agent, that all information shown hereon is true and correct to the Notary Public - State of Kansas  My Appt, Expires	FEB 1 8 2014  RECEIVED  for Dable 704 + 695 (Co.), be best of his /her knowledge and belief.  Signature of Applicant or Agent
The undersigned hereby certifies that he / she is  a duly authorized agent, that all information shown hereon is true and correct to the Notary Public - State of Kansas	FEB 18 2014  RECEIVED  for Dabl= 70il+ Gas (co.), a best of his /her knowledge and belief.
The undersigned hereby certifies that he / she is Brace Schuls— a duly authorized agent, that all information shown hereon is true and correct to the Notary Public - State of Kansas  My Appt, Expires	FEB 18 2014  RECEIVED  for Dable 700 + 695 (Co.), be best of his /her knowledge and belief.  Signature of Applicant or Agent
The undersigned hereby certifies that he / she is Brace Schuls— a duly authorized agent, that all information shown hereon is true and correct to the Notary Public - State of Kansas  My Appt. Expires	FEB 18 2014  RECEIVED  for Dab = 70i + 695 (Co.), be best of his /her knowledge and belief.  Signature of Applicant or Agent  February . 2014