

15-185-10659-00-00

WORKOVER PIT APPLICATION - CDP-1
VERBAL AUTHORIZATION

DATE: 8-31-16 TIME: 1340 785-757-3051
OPERATOR: NANEL F GOURSMAN CONTACT PERSON: Dorothy Wood
LEASE NAME: FISHER D-1
SE NE SW SEC. 25 TWP. 21 RANGE 13 W COUNTY: SF

CONSTRUCTION:
SIZE: WIDTH _____ LENGTH _____ DEPTH _____
ESTIMATED CAPACITY 80 BBLs

EST. DEPTH TO GROUNDWATER (if known): _____
TYPE OF FLUID: _____ Saltwater _____ Workover Fluids
_____ Cement _____ Drilling Mud/Cuttings

DOES OPERATOR PLAN TO LINE PIT: YES _____ NO
ESTIMATED TIME BEFORE PIT WILL BE CLOSED: _____ Days
ANY KNOWN WATER WELLS WITHIN 1/4 MILE OF PIT: _____ YES NO

O.C.C. INFORMATION: IS PIT IN SGA? YES _____ NO

- O.C.C. DISTRICT #1 RECOMMENDATION (Check One):
- _____ 1. Authorization granted with no liner.
 - 2. Authorization granted, if pit is lined.
 - _____ 3. Authorization granted, no liner necessary, but free fluids must be removed within _____ hours of completion of workover/plugging operations.
 - _____ 4. No verbal authorization will be given without on-site inspection.

Remind operator that pit permit form must be filed within five (5) days after verbal authorization.

RESULTS OF INSPECTION:

[Signature] Agent
JONELLE RAINS

Date 8-31-16