

New Application
Reauthorization
(Permit No. _____)

KANSAS CORPORATION COMMISSION
CONSERVATION DIVISION
130 S. Market- Room 207B
Wichita, Kansas 67202

Form CDP-1
12/91

15-009-24675-00-00

APPLICATION FOR SURFACE POND

FORM MUST BE TYPED

RECEIVED

Submit in Duplicate

Operator Name R.J.M. Oil Company, Inc.		KANSAS CORPORATION COMMISSION		License No. 30458	
Operator Address P.O. Box 256, Claflin, KS 67525		APR 24 2000 4-24-00			
Contact Person Chris Hoffman		CONSERVATION DIVISION WICHITA, KS		Phone No. (316) 785-0644	
Lease Name Brinson A-1	Pit is <input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing If existing, date constructed _____		Pit Location SE Qtr. Sec. 5 Twp. 17 Rge. 11 W 1980 Ft from N(S) (circle one) Line of Sec 660 Ft from (E)W (circle one) Line of Sec Barton County		
Type of Pond: <input type="checkbox"/> Burn Pit <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Treatment Pit <input type="checkbox"/> Workover Pit <input checked="" type="checkbox"/> Drilling Pit (If WP Supply API No. or Year Drld. _____)	Pit capacity 300 (bbls)				
Is the pit located in a Sensitive Ground Water Area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Chloride concentration: _____ mg/l (For Emergency Pits and Treatment Pits only)		
Is Pit bottom below ground level? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Artificial liner? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		How is pit lined if a plastic liner is not used? Native mud		
Pit dimensions (all but working pits): 80 Length (ft) 80 Width (ft) Depth from ground level to deepest point 6 (ft)					
If the pit is lined give a brief description of the liner material, thickness and installation procedure. _____ _____			Describe procedures for periodic maintenance and determining liner integrity, including any special monitoring. _____ _____		
Distance to nearest water well within one-mile of pit None ft. Depth of water well _____ ft.			Depth to shallowest fresh water 100 feet. Source of information: _____measured <input checked="" type="checkbox"/> well owner _____electric log _____ KDWR		
EMERGENCY, TREATMENT AND BURN PITS ONLY: 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 pond? <input type="checkbox"/> Yes <input type="checkbox"/> No			DRILLING AND WORKOVER PITS ONLY: Type of material utilized in drilling/workover _____Native mud_____ Number of working pits to be utilized 3 Abandonment procedure: _____Backfill and air dry_____ 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. April 24, 2000 _____ Date Signature of Applicant or Agent					
KCC OFFICE USE ONLY					
Date Rec'd 4/24/00		Permit No. _____		Permit Date 4/24/00	
Lease Inspection <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

15-009-246750000