
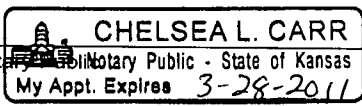


**KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
CLOSURE OF SURFACE PIT**

Form GDP-4  
April 2004  
Form must be Typed

|   |   |
|---|---|
| Operator Name: <b>Carroll Energy, LLC</b>   | License Number: <b>32912</b>  |
| Operator Address: <b>200 Arco Place - Suite 230 - Box 149, Independence, KS 67301</b>   |   |
| Contact Person: <b>Tim Carroll</b>  | Phone Number: ( <b>620</b> ) <b>332-1600</b>  |
| Permit Number (API No. if applicable): <b>15-205-27045-0000</b>   | Lease Name & Well No.: <b>COX 20-B4</b>   |
| Type of Pit:<br><input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit<br><input type="checkbox"/> Settling Pit <input checked="" type="checkbox"/> Drilling Pit<br><input type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit | Pit Location (QQQQ):<br>_____ <b>NE</b> _____ <b>SE</b> _____ <b>SW</b><br>Sec. <b>20</b> Twp. <b>28S</b> R. <b>16E</b> <input checked="" type="checkbox"/> East <input type="checkbox"/> West<br>_____ <b>990</b> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section<br>_____ <b>2280</b> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section<br>_____ <b>Wilson</b> _____ County |
| Date of closure: <u><b>10/13/2007</b></u>   |   |
| Was an artificial liner used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |   |
| If no, how were the sides and bottom sealed to prevent downward migration of the pit contents?  |   |
| <b>NATURAL CLAY</b>   |   |
| Abandonment procedure of pit:   | <b>RECEIVED</b><br><b>KANSAS CORPORATION COMMISSION</b><br><br><b>NOV 21 2007</b><br><br><b>CONSERVATION DIVISION</b><br><b>WICHITA, KS</b>   |
| Abandonment procedure of pit:<br><br><b>AIR DRY</b>   |   |
| The undersigned hereby certifies that he / she is <u><b>Vice Operating Manager</b></u> for <u><b>Carroll Energy, LLC</b></u> (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his /her knowledge and belief.  |   |
| <br>_____<br>Signature of Applicant or Agent  |   |
| Subscribed and sworn to me on this <u><b>18</b></u> day of <u><b>October</b></u> <u><b>2007</b></u>   |   |
| My Commission Expires: <u><b>3-28-2011</b></u>  |    |