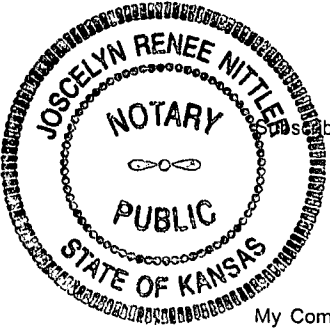


**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
CLOSURE OF SURFACE PIT**

Form CDP-4
April 2004
Form must be Typed

Operator Name: Indian Oil Co., Inc.	License Number: 31938
Operator Address: 2507 SE Hwy 160, Medicine Lodge, KS 67104	
Contact Person: Anthony Farrar	Phone Number: (620) 886 - 3763
Permit Number (API No. if applicable): <u>15057204190001</u>	Lease Name & Well No.: Schomaker "C" #2
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): _____ W/2 _____ NW _____ SW Sec. <u>13</u> Twp. <u>27S</u> R. <u>22</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>1980</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>330</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Ford _____ County
Date of closure: <u>3/10/2008</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? Natural Clay	
Abandonment procedure of pit: Pit dried out. Backfilled with Dozer.	
RECEIVED KANSAS CORPORATION COMMISSION APR 16 2008 CONSERVATION DIVISION WICHITA, KS	
The undersigned hereby certifies that he / she is _____ V.P. Operations _____ for _____ Indian Oil _____ (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his /her knowledge and belief.	
	_____ Signature of Applicant or Agent _____ Subscribed and sworn to me on this <u>14</u> day of <u>April</u> <u>2008</u> . _____ Joscelyn Renee Nittle Notary Public My Commission Expires: <u>July 10, 2010</u>