

KANSAS CORPORATION COMMISSION
 OIL AND GAS CONSERVATION DIVISION
CLOSURE OF SURFACE PIT

Form CDP-4
 April 2004
 Form must be typed

| | |
|---|--|
| Operator Name: LARSON ENGINEERING, INC. | License Number: 3842 |
| Operator Address: 562 WEST STATE ROAD 4 OLMITZ, KS 67564-8561 | |
| Contact Person: TOM LARSON | Phone Number: (620) 653-7368 |
| Permit Number (API No. if applicable): 15-101-22036-00-00 | Lease Name & Well No. BOCKELMAN 1-19 |
| 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): _____ - _____ - _____ - _____ Sec. <u>19</u> Twp. <u>18S</u> R. <u>29</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2140</u> Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section <u>1500</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section _____ LANE _____ County |

Date of closure: APRIL 3, 2008

Was an artificial liner used? Yes No

If no, how were the sides and bottom sealed to prevent downward migration of the pit contents?

NATIVE MUD & CLAY

Abandonment procedure of pit:

ALLOWED TO DRY, THEN BACKFILLED

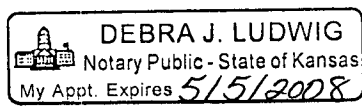
RECEIVED
 KANSAS CORPORATION COMMISSION
 APR 04 2008
 CONSERVATION DIVISION
 WICHITA, KS

The undersigned hereby certifies that he / she is SECRETARY/TREASURER for LARSON ENGINEERING, INC. (Co.), a duly authorized agent, that all information shown hereon is true and correct to the best of his / her knowledge and belief.

Carol Larson

Signature of Applicant or Agent

Subscribed and sworn to me on this 3RD day of APRIL, 2008

 DEBRA J. LUDWIG
 Notary Public - State of Kansas
 My Appt. Expires 5/5/2008

Debra J. Ludwig
 Notary Public

My Commission Expires: MAY 5, 2008