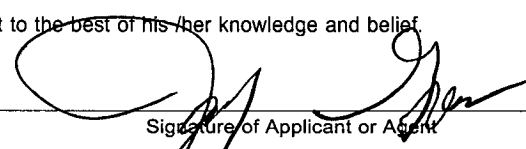
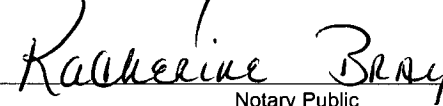


**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
CLOSURE OF SURFACE PIT**

Form CDP-4
April 2004
Form must be Typed

Operator Name: Castle Resources Inc.	License Number: 9860
Operator Address: PO Box 87 Schoenchen, KS 67667	
Contact Person: Jerry Green	Phone Number: (785) 625 - 5155
Permit Number (API No. if applicable): 15-195225380000	Lease Name & Well No.: Garrison #1
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): NW - SE - SE - _____ Sec. 3 Twp. 15 R. 21 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 1030 Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 1020 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section Trego _____ County
Date of closure: <u>8/31/08</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? sealed with bentonite	
Abandonment procedure of pit: Allow contents to evaporate & backfill	
RECEIVED KANSAS CORPORATION COMMISSION SEP 19 2008 CONSERVATION DIVISION WICHITA, KS	
The undersigned hereby certifies that he / she is _____ President _____ for Castle Resources Inc. (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>16th</u> day of <u>September</u> , <u>2008</u>	
 _____ Notary Public	
My Commission Expires: <u>7-3-12</u>	
