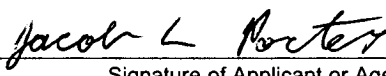
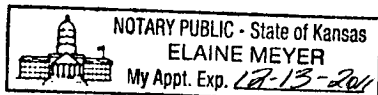
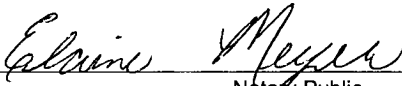


KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form CDP-4
April 2004
Form must be Typed

CLOSURE OF SURFACE PIT

| | |
|---|---|
| Operator Name: Carmen Schmitt Inc. | License Number: 6569 |
| Operator Address: PO Box 47, Great Bend, KS 67530 | |
| Contact Person: Jacob Porter | Phone Number: (620) 793 - 5100 |
| Permit Number (API No. if applicable): 15-047-21551-000① | Lease Name & Well No.: Putter #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): _____ E/2 _____ W/2 _____ SE Sec. 8 _____ Twp. 23s R. 19w <input type="checkbox"/> East <input checked="" type="checkbox"/> West 1450 fsl Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section 1700 fsl Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section Edwards _____ County |
| Date of closure: February 25, 2008 | |
| 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? | |
| Abandonment procedure of pit: evaporate and backfill pit | |
| RECEIVED KANSAS CORPORATION COMMISSION MAR 04 2008 CONSERVATION DIVISION WICHITA, KS | |
| The undersigned hereby certifies that he / she is _____ Operations Manager _____ for _____ Carmen Schmitt 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 3rd day of March, 2008 | |
|  |  _____ Notary Public |
| My Commission Expires: 12-13-2011 | |