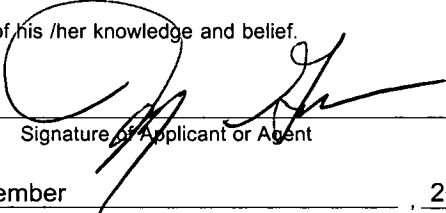
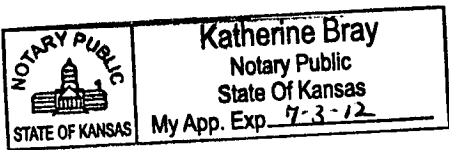
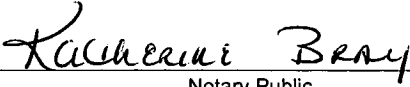


KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
CLOSURE OF SURFACE PIT

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): 15-195-22579-00-00	Lease Name & Well No.: Robert E #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): SE - SE - NE - NW Sec. 19 Twp. 14 R. 21 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 1250 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 2500 Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section Ellis County
Date of closure: <u>11/20/08</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: allowed contents to dry and backfilled	
RECEIVED KANSAS CORPORATION COMMISSION DEC 15 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>11th</u> day of <u>December</u> , 2008	
	 _____ Katherine Bray Notary Public
My Commission Expires: <u>7-3-12</u>	