

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

Form CDP-4  
April 2004  
Form must be Typed

Operator Name: <b>Ritchie Exploration, Inc.</b>	License Number: <b>4767</b>
Operator Address: <b>PO Box 783188</b>	
Contact Person: <b>John Niernberger</b>	Phone Number: ( <b>316</b> ) <b>691 - 9500</b>
Permit Number (API No. if applicable): <b>15-135-24812-0000</b>	Lease Name & Well No.: <b>Deer Valley #1</b>
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): approx <u>  </u> <u>  </u> <u>  </u> <u>  </u> Sec. <u>31</u> Twp. <u>20</u> R. <u>23</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2160</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>970</u> Feet from <input type="checkbox"/> East / <input checked="" type="checkbox"/> West Line of Section <u>Ness</u> County

Date of closure: 3/25/09

Was an artificial liner used?  Yes  No

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

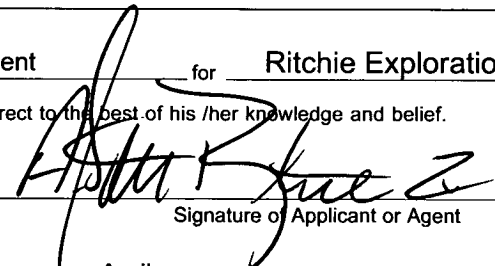
**Native muds and clays.**

**KANSAS CORPORATION COMMISSION  
MAY 01 2009  
RECEIVED**


Abandonment procedure of pit:

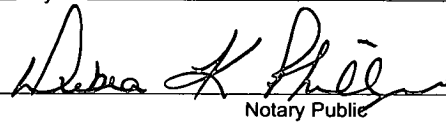
**Backfilled and leveled as close as possible to it's natural state.**

The undersigned hereby certifies that he / she is \_\_\_\_\_ President \_\_\_\_\_ for **Ritchie Exploration, 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 30th day of April, 2009

 **DEBRA K. PHILLIPS**  
Notary Public - State of Kansas  
My Appt Expires 5-4-11

  
\_\_\_\_\_  
Notary Public

My Commission Expires: 5-4-11