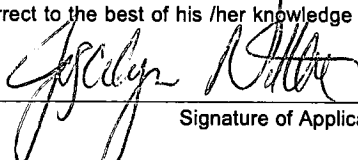
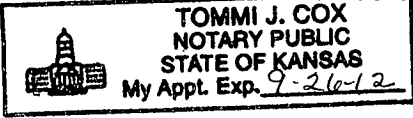
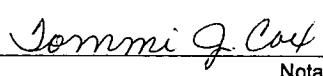


KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
CLOSURE OF SURFACE PIT

Form GDP-4
April 2004
Form must be Typed

Operator Name: Indian Oil Co., Inc.		License Number: 31938	
Operator Address: PO Box 209, Medicine Lodge, KS 67104			
Contact Person: Anthony Farrar		Phone Number: (620) 886 - 3763	
Permit Number (API No. if applicable): 15-047-20488 - 00 - 00		Lease Name & Well No.: Jimmie 1-6	
Type of Pit: <input type="checkbox"/> Emergency Pit <input type="checkbox"/> Burn Pit <input type="checkbox"/> Settling Pit <input type="checkbox"/> Drilling Pit <input checked="" type="checkbox"/> Workover Pit <input type="checkbox"/> Haul-Off Pit		Pit Location (QQQQ): - SW - NE - NE Sec. 6 Twp. 25 R. 17 <input type="checkbox"/> East <input checked="" type="checkbox"/> West 990 Feet from <input checked="" type="checkbox"/> North / <input type="checkbox"/> South Line of Section 990 Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section Edwards County	
Date of closure: 1/31/2009			
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? Natural Clay			
Abandonment procedure of pit: Allowed to evaporate; backfill per KCC regulations.		RECEIVED MAR 11 2009 KCC WICHITA	
The undersigned hereby certifies that he / she is Secretary/Treasurer for Indian Oil Co., 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 10 day of March, 2009			
		 _____ Notary Public	
My Commission Expires: 9-26-12			