

**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): 1505102153 0002	Lease Name & Well No.: Pearl 1
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): _____ - <u>NE - NE - SE</u> Sec. <u>13</u> Twp. <u>11</u> R. <u>17S</u> <input type="checkbox"/> East <input checked="" type="checkbox"/> West <u>2310</u> Feet from <input type="checkbox"/> North / <input checked="" type="checkbox"/> South Line of Section <u>310</u> Feet from <input checked="" type="checkbox"/> East / <input type="checkbox"/> West Line of Section <u>Ellis</u> _____ County

Date of closure: 3/15/10

Was an artificial liner used? Yes No

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

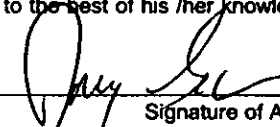
sealed with bentonite

Abandonment procedure of pit:

allowed to evaporate & backfill


**RECEIVED
JUN 11 2010
KCC WICHITA**

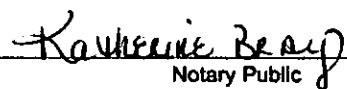
The undersigned hereby certifies that he / she is _____ **President** _____ for _____ **Castle Resources Inc.** _____ (Co.),
a duly authorized agent, that all information shown hereon is true and correct to the best of his /her knowledge and belief.



 Signature of Applicant or Agent

Subscribed and sworn to me on this 10th day of June _____, 2010


 KATHERINE BRAY
 NOTARY PUBLIC
 STATE OF KANSAS
 MY APPL EXPIRES 7-3-12



 Notary Public

My Commission Expires: 7-3-12