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Kansas Corporation Commission Oil & Gas Conservation Division

Form T-1 June 2000 Form must be Typed Form must be Signed All blanks must be Filled

CC WICHITA REQUEST FOR CHANGE OF OPERATOR

TRANSFER OF INJECTION OR SURFACE POND PERMIT

OR 215911	
Check Applicable Boxes.	Effective Date of Transfer: January 1, 2004
Oil Lease: No. of Wells**	Lease Name: Medlen #1
Gas Lease: No. of Wells 1 **	
** Side Two Must Be Completed.	<u>NESWSESec14Twp30SR_12E</u> W
Saltwater Disposal Well - Docket No.	Legal Description of Lease: 990 FSL & 1900 FEL;
Spot Location: feet from N / S Line	Sec. 14-30S-12E
feet from E / W Line	
Enhanced Recovery Project Docket No	County: Elk
Entire Project: Yes No	
Number of Injection Wells**	Production Zone(s): Cherokee Coals
Field Name: Longton	Injection Zone(s):
Surface Pond Permit #15-049-20568	feet from N / S Line of Section
(API # If Drill Pit)	feet from E / W Line of Section
Identify: Emergency Pit Burn Pit	Storage Pit
Past Operator's License No. 04448	Contact Person: Mr. James R. Perkins
Past Operator's Name & Address: Perkins Oil Enterprises, Inc.	Phone: (620) 374-2133
Post Office Box 707 Howard, Kansas 67349	
	Date: March 1, 2004
Title: President	Signature Lance School
New Operator's License No. 33344	Contact Person: Mr. Jerry Cash
New Operator's Name & Address: Quest Cherokee LLC	Phone: (405) 840-9894
5901 North Western, Suite 200	Oil / Gas Purchaser: BlueStem Pipeline Inc.
Oklahoma City, OK 73118	Date: March 1, 2004
	\bigcirc
Title: CEO	Signature:
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pond permit #15-049-20568 has been
	ration Commission. This acknowledgment of transfer pertains to Kansas
Corporation Commission records only and does not convey any ownership	interest in the above injection well(s) or pond permit.
<u> </u>	
is acknowleged as the	is acknowleged as the
new operator and may continue to inject fluids as authorized by	new operator of the above named lease containing the surface pond
Docket # Recommended action:	permitted by #
	,
Date:	Date:
Authorized Signature	Authorized Signature

Must Be Filed For All Wells

* Lease Name:	Medlen #1	* Location: Sec. 14-30S-12E			
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
#1	15-049-20568 🗸	990 FSL Circle FSL/FNL	1900 FEL FEL/FWL	Gas	Producing
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	-	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		MALIA CONTRACTOR OF THE STATE O
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	RE	CEIVED
		FSL/FNL	FEL/FWL	MAR	2 3 2004 VICHITA
		FSI /FNI	FFI /FWI	KCC V	VICHITA

A separate sheet may be attached if necessary

^{*} When transferring a unit which consists of more than one lease please file a separate side two for each lease. If a lease covers more than one section please indicate which section each well is located.

010104_ Medlen_1.pdf



KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1 June 2000 Form must be Typed Form must be Signed All blanks must be Filled

REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE POND PERMIT

Check Applicable Boxes:	Effective Date of Transfer:
Oil Lease: No. of Wells ** Gas Lease: No. of Wells ** ** Side Two Must Be Completed. Saltwater Disposal Well - Docket No feet from N / S Line feet from E / W Line Enhanced Recovery Project Docket No Entire Project: Yes No Number of Injection Wells ** Field Name: Longton	Lease Name: Medlen #1 NE _ SW _ SE _ Sec 14 _ Twp 30S _ R _ 12E _ V E _ W Legal Description of Lease: 990 FSL & 1900 FEL; Sec. 14-30S-12E _ SE4 _ S2NW4
Surface Pond Permit #15-049-20568 (API # If Drill Pit) Identify: Emergency Pit Burn Pit	feet from N / S Line of Section feet from E / W Line of Section Storage Pit Drill Pit C / Ted
Past Operator's License No. 04448 Past Operator's Name & Address: Perkins Oil Enterprises, Inc. Post Office Box 707 Howard, Kansas 67349 Title: President	Contact Person: Mr. James R. Perkins Phone: (620) 374-2133 Date: March 1 2004 Signature
New Operator's License No. 33344 New Operator's Name & Address: Quest Cherokee LLC 5901 North Western, Suite 200 Oklahoma City, OK 73118 Title: CEO	Contact Person: Mr. Jerry Cash Phone: (405) 840-9894 Oil / Gas Purchaser: BlueStem Pipeline Inc. Date: March 1, 2004 Signature: KCC WICHIT/
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corpo Corporation Commission records only and does not convey any ownership	oration Commission. This acknowledgment of transfer pertains to Kansas
is acknowleged as the new operator and may continue to inject fluids as authorized by Docket # Recommended action:	is acknowleged as the new operator of the above named lease containing the surface pond permitted by #
Date:	Authorized Signature