KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

REQUEST FOR CHANGE OF OPERATOR

TRANSFER OF INJECTION OR SURFACE POND PERMIT

Check Applicable Boxes 20 / 968	Effective Date of Transfer:/-30-02		
Oil Lease: No. of Wells **			
☑ Gas Lease: No. of Wells 1 **	Lease Name: MASONIC HOME 5-2		
** Side Two Must Be Completed	Sec. <u>34</u> Twp: <u>25</u> R <u>36</u> DE VW		
☐ Saltwater Disposal Well - Docket No	Legal Description of Lease: NE/4 NW/4		
Spot Location:feet from N / S Line			
feet from E / W Line			
☐ Enhanced Recovery Project Docket No.			
Entire Project: Yes No	County: KEARNY		
Number of Injection Wells	Producing Zone(s): COUNCIL GROVE		
Field Name: PANOMA COUNCIL GROVE	Injection Zone(s):		
Surface Pond Permit #(API # If Drill Pit)	Producing Zone(s): Injection Zone(s): feet from N/S Line of Section feet from E/W Line of Section Drill Pit		
Identify:	orage Pit Drill Pit		
Past Operator's License No. 30332	Contact Person: Gary Brune		
Past Operator's Name & Address: ENERGY DEVELOPMENT CORP.			
12600 NORTHBOUROUGH #250 HOUSTON, TX 77067	Date: 3-13-02-		
Title: Production Superintendent	Signature: Jay A		
New Operator's License No. 32987	Contact Person: BARBARA GODEJOHN		
New Operator's Name & Address: SAMEDAN OIL CORPORATION	Phone: 281-876-6150		
12600 NORTHBOROUGH #250	Oil / Gas Purchaser: Enserco		
HOUSTON, TX 77067	Date: 3-13-02 , //		
Title: REGULATORY ANALYST	Signature Bachaca Dodepolin		
Acknowledgment of Transfer: The above request for transfer of injection authored, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the above request for transfer of injection authored.	ommission. This acknowledgment of transfer pertains to Kansas Corporation		
is acknowledged as	is acknowledged as the		
the new operator and may continue to inject fluids as authorized by			
Docket # Recommended action:	new operator of the above named lease containing the surface pond permitted by #		
Date:	Date:		
Authorized Signature	Authorized Signature		



Side Two

Must Be Filed For All Wells

* Lease Name:	MASONIC HOME		* Location:_	NE/4	NE/4 NW/4	
Well No.	API No. Footage from Sectio (YR DRLD/PRE '67) (I.e. FSL = Feet from Sc			Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
	5chaffer	Circle	Circle			
#5-2	1509320209			GAS	PROD	
		_				
	<u></u>	FSL / FNL	FÉL / FWL _			
		F\$L / FNL	FEL / FWL _			
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		FSL / FNL	_ FEL / FWL			

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 offe section plese indicate which section each well is loacted.