## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1 April 2004 Form must be Typed Form must be Signed All blanks must be Filled

## REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Check Applicable Boxes:	I		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: February 2004		
✓ Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: 223569		
Gas Gathering System:	Lease Name: Amos #2		
Saltwater Disposal Well - Permit No.:	CSWSec19Twp34SR24WEW		
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease: All of Section 19		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: Clark		
Number of Injection Wells**	Production Zone(s): Chester		
Field Name: McKinney Southeast	Injection Zone(s):		
** Side Two Must Be Completed.	injection Zone(s).		
Surface Pit Permit No.: 025-21230-0000	760 feet from ☐ N / ✓ S Line of Section		
(API No. if Drill Pit, WO or Haul)			
Type of Pit: Emergency Burn Settling	Haul-Off		
Past Operator's License No. 32880 32889	Contact Person: Mr. Jamie Brown		
	Phone: 303-295-2223		
Past Operator's Name & Address: J.K. Brown, Inc.			
1732 Wazee #204, Denver, CO. 80202	Date: 5/16/05		
Title: President	Signature: / CENT		
	MA: 21 200		
New Operator's License No. 33384	Contact Person: Mr. Jamie Brown		
New Operator's Name & Address: 1863 Wazee St. #6A	Phone: 303-295-2223		
Denver, CO. 80202	Oil / Gas Purchaser: Duke Energy		
HIGH BLUFF OPERATING, LLC	Date: ALways from 11-6-01		
• /	Date: ALWays 4Fom [11650]		
Title: President	Signature:		
Acknowledgment of Transfer. The above request for transfer of injection	authorization, surface pit permit # 025-21230-0000 has been		
	ration Commission. This acknowledgment of transfer pertains to Kansas		
Corporation Commission records only and does not convey any ownership			
Corporation Commission records only and does not convey any ownersing	Therese in the above injection wents, or pic permit.		
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 pit		
Permit No.: Recommended action:	permitted by No.:		
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR $5/23/05$	PRODUCTION MAY 2 5 2005 UIC 5/24/05		
Mail to: Past Operator New Operator	District		

## Side Two

## Must Be Filed For All Wells

* Lease Name: Amos #2				 * Location: Clark County, KS			
Lease Name		<del>-</del>	* <sub>Location:</sub> Clark County, KS				
Well No.	API No. (YR DRLD/PRE '67) 025-21230-000	Footage from Section Line (i.e. FSL = Feet from South Line)			Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
Amos #2		√ <u>760</u>	Circle FSUFNL 500	Circle FEL(FWL)	Gas	Producing	
			FSL/FNL	FEL/FWL			
			FSL/FNL	FEL/FWL		18718477477	
			FSL/FNL	FEL/FWL			
			FSL/FNL	FEL/FWL			
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						MAY 20 2000	
			FSI /FNI	FEL/FWI	ž	COWICHITA	
			FSL/FNL	FEL/FWL			

A separate sheet may be attached if necessary

<sup>\*</sup> 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.