## 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

DOR-110537	2/15/02				
Check Applicable Boxes:	Effective Date of Transfer: 2713702				
X Oil Lease: No. of Wells 1 **	Lease Name: Jilg				
Gas Lease: No. of Wells**	C_NENW_Sec. 1_Twp. 14S_R. 30EX_W				
** Side Two Must Be Completed.					
Saltwater Disposal Well - Docket No.	Legal Description of Lease: NW/4				
Spot Location: feet from N / S Line	,				
feet from E / W Line					
Enhanced Recovery Project Docket No.	County: Gove				
Entire Project: Yes No RECEIVED	Production Zone(s): Lansing				
Number of Injection Wells FEB 2 1 2002					
Field Name: R & M	Injection Zone(s):				
KGC WICHITA					
Surface Pond Permit #	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 Drill Pit				
Past Operator's License No. 6568	Contact Person: Charlotte Van Valkenburg				
Past Operator's Name & Address: Kaiser-Francis Oil Co.	Phone: 918-491-4314				
	2/10/02				
P. O. Box 21468, Tulsa, OK 74121-1468	17816.				
Title: Technical Coordinator	Signature: C. Jan alkerbu				
New Operator's License No. 9860	Contact Person: Jerry Green				
New Operator's Name & Address: Castle Resources, Inc.	Phone: 785-625-5155				
P. O. Box 87	Oil / Gas Purchaser: NCRA				
Schoenchen, KS 67667	Date: 2-12-0,2				
Title: President	Signature:				
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pond permit #has been				
noted, approved and duly recorded in the records of the Kansas Corpo	oration Commission. This acknowledgment of transfer pertains to Kansas				
Corporation Commission records only and does not convey any ownershi	p interest in the above injection well(s) or pond permit.				
to activate and an the	is acknowleged as the				
is acknowleged as the	new operator of the above named lease containing the surface pond				
new operator and may continue to inject fluids as authorized by					
Docket # Recommended action:	permitted by #				
Date:	Date:				
Authorized Signature	Authorized Signature				
7/30/02 MAY 0 1 702	•				

## Must Be Filed For All Wells

* Lease Name:	SCANNELL		_ * Location:	Sec. 1-1	4S-30W	
Well No.	ell No. API No. Footage from Se (YR DRLD/PRE '67) (i.e. FSL = Feet from				Well NJ/WSW)	Well Status (PROD/TA'D/Abandoned
1	<u>15-063</u> ∂20140 ✓	660 Circle	980 Circle	011		Shut in
		FSL/FNL	FEL/FWL _			
		FSL/FNL	FEL/FWL _			
		FSL/FNL	FEL/FWL _			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL_	14 A		
		FSL/FNL	FEL/FWL _	:		
<del></del>		FSL/FNL	FEL/FWL _			
		FSL/FNL	FEL/FWL _		· · · · · · · · · · · · · · · · · · ·	
		FSL/FNL	FEL/FWL _			
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		FSL/FNL	FEL/FWL _			
		·				
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
****		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL		İ		
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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.