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

Check Applicable Boxes:	February 26, 2004			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: February 26, 2004			
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 123869  Lease Name: Adams			
Gas Gathering System: 0				
Saltwater Disposal Well - Permit No.:	SE Sec. 11 Twp. 12 R. 22 EVW			
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease: SE/4(160 acres)			
Enhanced Recovery Project Permit No.: 0	of Section 11-12s-22w of Trego County, Kansas			
Entire Project: Yes No	County: Trego			
Number of Injection Wells**	Production Zone(s): Lansing/Kansas City, Marmaton			
Field Name: Sherfick Northwest				
** Side Two Must Be Completed.	Injection Zone(s): 0			
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section  feet from E / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling			
Past Operator's License No. 03919	Contact Person: Vincent J. Werth			
Past Operator's Name & Address: Challenger Exploration	Phone: 785-625-4780			
P. O. Box 1112 - Hays, Kansas 67601	Date: August 31, 2004			
Title: Owner/Operator	Signature: //prof MMM			
	Contact Person: Mark Torr			
New Operator's License No. 32890				
New Operator's Name & Address: HT Oil LLC	Phone: 785-425-6763			
6150 Stoneridge Mall Rd., Suite 365	Oil / Gas Purchaser: Plains Marketing(785-483-31710			
Pleasanton, California 94588	Date: August 31, 2004			
Title: Geologist	Signature: Dusty Phoods			
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been			
	ration Commission. This acknowledgment of transfer pertains to Kansas			
Corporation Commission records only and does not convey any ownership				
is acknowleged as the	is acknowleged as the			
	new operator of the above named lease containing the surface pit			
new operator and may continue to inject fluids as authorized by				
Permit No.: Recommended action:	permitted by No.:			
Date:	Date:			
Authorized Signature	Authorized Signature			
DISTRICTEPR 9 10 04	PRODUCTION SEP 1 4 2004 UIC 9/13/04			
Mail to: Past Operator New Operator	District			

## Must Be Filed For All Wells

## RECEIVED SEP 0 7 2004

* Lease Name: Adams				* Location: SE/4 of Section CC128 2 WITA			
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	15-195-21754-00-00	990 Circle	990	Circle FEI/FWL	Oil	Producer	
		FSL/FNL		FEL/FWL			
		FSL/FNL		FEL/FWL	i i		
		FSL/FNL		FEL/FWL			
		FSL/FNL		FEL/FWL			
		FSL/FNL		FEL/FWL			
		FSL/FNL	-	FEL/FWL			
		FSL/FNL		FEL/FWL			
		FSL/FNL		FEL/FWL			
				FEL/FWL			
	***************************************			FEL/FWL			
				FEL/FWL			
				FEL/FWL			
		FSL/FN	L	FEL/FWL			
		FSL/FN		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.