

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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

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

Check Applicable Boxes:

- ☒ Oil Lease: No. of Oil Wells _____ **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☒ Saltwater Disposal Well - Permit No.: D 27537
Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: _____

**** Side Two Must Be Completed.**

Effective Date of Transfer: 3-1-07

KS Dept of Revenue Lease No.: 134289

Lease Name: Stone

_____ Sec. 18 Twp. 26 R. 33 ☐ E ☒ W

Legal Description of Lease: _____

W/2 NW/4 of Sec. 18-26S-33W

County: Finney

Production Zone(s): Chester

Injection Zone(s): Cedar Hills

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ Drilling OR

Past Operator's License No. 31093

Past Operator's Name & Address: Becker Oil Corp.
P O Box 1550, Conifer, CO 80433

Title: _____

Contact Person: Clyde M. Becker Jr.

Phone: 303-816-2013

Date: _____

Signature: Clyde M Becker Jr

New Operator's License No. 9860

New Operator's Name & Address: Castle Resources Inc.
PO Box 87
Schoenchen, KS 67667

Title: President

Contact Person: Jerry Green

Phone: 785-625-5155

Oil / Gas Purchaser: Plains Marketing

Date: 4/10/07

Signature: [Signature]

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation 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 pit permit.

Castle Resources Inc is acknowledged as the

new operator and may continue to inject fluids as authorized by

Permit No. D-27537 Recommended action: _____

Date: 4-30-07 Barbara Montgomery

Authorized Signature

_____ is acknowledged as the

new operator of the above named lease containing the surface pit permit

permitted by No.: _____

Date: _____

CONSERVATION DIVISION

Authorized Signature

DISTRICT _____

EPR 4-26-07

PRODUCTION

APR 30 2007

UIC

4-30-07

Mail to: Past Operator 4-30-07

New Operator 4-30-07

District 4-30-07

Must Be Filled For All Wells

KDOR Lease No.: _____

* Lease Name: Stone * Location: _____

[illegible]

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