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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

Solitable Service Section Sec	Check Applicable Boxes:	Effective Date of Transfer: 3-19-02
Gas Lease: No. of Wells "Size Two Must Be Complete." Solt Wast Recomplete. Solt No. of Wells Solt West Must Be Complete. Solt No. of Lease: No. of Lease: No. of Lease: No. of Lease: Solt No. of Lease: Solt No. of Lease: No. of Lease: No. of Lease: Solt No. of No. of Lease: Solt No. of Lease:		п.11- Ст.11
Sec. 14 Twp. 15 R. 20 FEXIV Salvater Disposal Well - Docket No. Sec. 14 Twp. 15 R. 20 FEXIV Spot Location: feet from N / S Line feet from E / W Line feet from E / W Line feet from E / W Line SE / 4		
Spot Location:		Sec. 14 Twp. 16 R. 20 EXW
feet from E / W Line	Saltwater Disposal Well - Docket No	Legal Description of Lease:
Enhanced Recovery Project Docket No Enlire Project: Yes No Number of injection Wells Production Zone(s): Arbuckle, Lansing-KC Injection Zone(s): NA	Spot Location: feet from N / S Line	SE/4
Entire Project: Yes No Number of Injection Wells Fleid Name: Keough NE Surface Pond Permit #	feet from E / W Line	
Entire Project Nes No Number of Injection Wells Production Zone(s): Arbuckle, Lansing-KC Injection Zone(s): NA Surface Pond Permit # feet from N / S Line of Section feet from E / W Li	Enhanced Recovery Project Docket No	Pugh
Number of Injection Wells Field Name: Keough NE Surface Pond Permit #	Entire Project: Yes No	
Surface Pond Permit #		
Surface Pond Permit #		Injection Zone(s): NA
Identity: Emergency Pit Burn Pit Storage Pit Drill Pit		
dentify: Emergency Pit Burn Pit Storage Pit Drill Pit	Surface Pond Permit #	feet from N / S Line of Section
Past Operator's License No. 5042 Contact Person: Jon M. Callen Past Operator's Name & Address: Edmiston 0il Co., Inc. Phone: 316-265-5241 125 N. Market. Suite 1130 Wichita, KS 67202 Title: President 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 Schoenchen, KS 67667 Date: March 7, 2002 Title: Procedure Person: Jerry Green New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 Date: March 7, 2002 Title: Procedure Person: Jerry Green New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 Date: March 7, 2002 Title: Procedure Person: Jerry Green New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 Date: March 7, 2002 Title: Procedure Person: Jerry Green New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 Date: March 7, 2002 Title: Procedure Person: Jerry Green New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 Date: March 7, 2002 Title: Procedure Person: Jerry Green New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 Date: Procedure Person: Jerry Green New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 Title: Procedure Person: Jerry Green New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 Date: Procedure Person: Jerry Green New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 Title: Procedure Person: Jerry Green New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 Title: Procedure Person: Jerry Green New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 Title: Procedure Person: Jerry Green New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 Title: Procedure Person: Jerry Green New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 Title: Procedure Person: Jerry Green New Operator's Name & Add	(API # If Drill Pit)	feet from E / W Line of Section
Past Operator's License No. 5042 Past Operator's Name & Address: Edmiston 0il Co., Inc. Phone: 316-265-5241 125 N. Market, Suite 1130 Wichita, KS 67202 Title: President New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 P.O. Box 87 Schoenchen, KS 67667 Oil / Gas Purchaser: Date: March 7, 2002 Title: President Signature: Jerry Green New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 P.O. Box 87 Schoenchen, KS 67667 Oil / Gas Purchaser: Date: Jerry Green 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 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 pond permit. Is acknowledged as the is acknowledged as the new operator and may continue to inject fluids as authorized by Docket # Recommended action: permitted by #	Harristin Smarragray Pit Rurn Pit	Storage Rit Drill Pit
Past Operator's Name & Address: Edmiston Oil Co., Inc. Phone: 316-265-5241 125 N. Market. Suite 1130 Wichita, KS 67202 Date: March 7, 2002 Fittle: President New Operator's License No. 9860 New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 P.O. Box 87 Schoenchen, KS 67667 Oil / Gas Purchaser: Date: Jerry Green Phone: 785-625-5155 Oil / Gas Purchaser: Date: Jerry Green 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 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 pond permit. Is acknowledged as the new operator and may continue to inject fluids as authorized by Docket # Recommended action: permitted by #	identify.	
Past Operator's Name & Address: Edmiston Oil Co., Inc. 125 N. Market. Suite 1130 Wichita, KS 67202 Title: President New Operator's License No. New Operator's License No. New Operator's Name & Address: Castle Resources, Inc. Phone: 785–625–5155 P.O. Box 87 Schoenchen, KS 67667 Oil / Gas Purchaser: Date: Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pond permit #	Past Operator's License No. 5042	Contact Person: Jon M. Callen
Date: President Signature: March 7, 2002	Pact Operator's Name & Address Edmiston Oil Co., Inc.	Phone: 316-265-5241
Title: President New Operator's License No. 9860		P Date: March 7, 2002
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 Schoenchen, KS 67667 Oil / Gas Purchaser: Date: Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pond permit #		<i></i> , , ,,
New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 P.O. Box 87 Schoenchen, KS 67667 Date: Date: 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 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 pond permit. 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 pond permitted by #	Title: President	Signature:
New Operator's Name & Address: Castle Resources, Inc. Phone: 785-625-5155 P.O. Box 87 Schoenchen, KS 67667 Date: Date: 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 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 pond permit. 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 pond permitted by #	9860	Jerry Green
P.O. Box 87 Schoenchen, KS 67667 Date: Date: Date: Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pond permit #	Treat opposition a line treat treatment and	
Date: Signature: Signature	New Operator's Name & Address: <u>Castle Resources</u> , <u>Inc</u> .	Phone: 785-625-5155
Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pond permit #	P.O. Box 87 Schoenchen, KS 67667	A-7
Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pond permit #		Date: 116 1 20 12002
Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pond permit #	Pracidat	Signature
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Docket # Recommended action: permitted by #		,
Date:	new operator and may continue to inject fluids as authorized by	
Date: Date: Authorized Signature Authorized Signature	Docket # Recommended action:	permitted by #
Date: Date: Authorized Signature		
MAY 1 0 2002 Authorized Signature	Date:	Date:
	MAY 1 0 2002 Authorized Signature	Aduloitzed Signature

SCANNED

Must Be Filed For All Wells

APR 29 202

* Lease Name:_	Hubbs	 	* Location: SE	/4 Sec 14- 5	116S-R20W
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INI/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-165-20911	Circle 2310 FSLFNL	Circle 1650 (FEL)FWL	Oil	TA'D
	15-165-20964	1650 FSI FNL	930 FELFWL	011	TA'D
3	15-165-21042	2310 (FSL)FNL	330 FELFWL	l"	TA'D
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		-
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		·
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL .		
		FSL/FNL	FEL/FWL	'	
	-	FSL/FNL .	FEL/FWL _	·	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL .		
		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		
				. 1	

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 lif a lease covers more than one section please indicate which section each well is located.