RECEIVED

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 MAY 1 2 2003 TRANSFER OF INJECTION OR SURFACE POND PERMIT

KCC WICHITA Check Applicable Boxes: DOR 212816			
Check Applicable Boxes: LCX 212816	Effective Date of Transfer: 3-20-03		
Oil Lease: No. of Wells***	DeCemp "A"		
(A) Gas Lease: No. of Wells 1	Lease Name: DeCamp "A"		
** Side Two Must Be Completed.	NWSENESec.33Twp.32SR35EX_W		
Saltwater Disposal Well - Docket No	Legal Description of Lease:		
Spot Location: feet from N / S Line	All of Sec. 33-32-35W		
feet from E / W Line			
Enhanced Recovery Project Docket No.	County: Stevens		
Entire Project: Yes No	Production Zone(s): Morrow		
Number of Injection Wells**			
Field Name: Hugoton	Injection Zone(s):		
	feet from N / S Line of Section		
Surface Pond Permit #(API # If Drill Pit)			
Identify: Emergency Pit Burn Pit	feet from E / W Line of Section K32		
2/2/-2	7 7 7 1 1		
Past Operator's License No. 33012 Exp. 3 3003	Contact Person: James D. Welch		
Past Operator's Name & Address: Matrix Resources, L.L.C.	Phone: 405-840-2727		
P.O. Box 54523, Oklahoma City, OK 73154	Date: 18-03		
Itte: Managing Member	Signature: Signature:		
New Operator's License No. 33061	Contact Person: James D. Welch		
New Operator's Name & Address:	Phone: 405-840-2727		
Energy Management Co.	Oil / Gas Purchaser:		
2125 County Road, Independence, KS 67301	Date: 03-13-0 と		
	Signature: Wes Old		
itle: Agent	Signature:		
	has been		
	authorization, surface pond permit # has been		
	ration Commission. This acknowledgment of transfer pertains to Kansas		
Corporation Commission records only and does not convey any ownership	o interest in the above injection wents) or pond 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 pond		
Docket # Recommended action:	permitted by #		
Date:	Date:		
Authorized Signature	Authorized Signature		

SCANNED

Must Be Filed For All Wells

* Lease Name: _	DeCamp "A"	* Location: NW SE NE Sec. 33-32S-35W			
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)
2	15-189-20888	Circle 3518 FSI/FNL 1120	Circle FEL WU _	Gas	S.I.
		FSL/FNL	FEL/FWL	. ,	
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL		
		FSL/FNL			
-		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL		
		FSL/FNL			
		FSL/FNL	4		
	*** · · ·	FSL/FNL			
		FSL/FNL,			
				-	
		FSL/FNL			=
		FSL/FNL			
		FSL/FNL			
		FSL/FNL			
		FSL/FNL		· · · · · · · · · · · · · · · · · · ·	
	<u></u>	FSL/FNL	FEL/FWL		

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 section please indicate which section each well is located.