

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 207996

Check Applicable Boxes

☐ Oil Lease: No. of Wells _____ **☒ Gas Lease: No. of Wells 1 **

** Side Two Must Be Completed

☐ Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N / S Line

_____ feet from E / W Line

☐ Enhanced Recovery Project Docket No. _____Entire Project: ☐ Yes ☐ No

Number of Injection Wells _____ **

Field Name: PANOMA COUNCIL GROVEEffective Date of Transfer: 3/27/2003Lease Name: SHELL 1-2_____ - _____ - _____ Sec. 26 Twp: 24 R 37 ☐ E ☒ WLegal Description of Lease: SW/4 NE/4

RECEIVED

APR 30 2003

KCC WICHITA

County: KEARNYProducing Zone(s): COUNCIL GROVE

Injection Zone(s): _____

Surface Pond Permit # _____

(API # If Drill Pit)

_____ feet from N/S Line of Section

_____ feet from E/W Line of Section

Identify: ☐ Emergency Pit ☐ Burn Pit ☐ Storage Pit ☐ Drill Pit

KBR

Past Operator's License No. 32987 Exp. 1/30/02Past Operator's Name & Address: Samedan Oil Corporation12600 NORTHBOUROUGH #250 HOUSTON, TX 77067Title: Regulatory AnalystContact Person: Barbara GodejohnPhone: 281/876-6150Date: 4/23/2003Signature: Barbara GodejohnNew Operator's License No. 33190New Operator's Name & Address: Noble Energy, Inc.12600 NORTHBOROUGH #250HOUSTON, TX 77067Title: Production SuperintendentContact Person: Gary BrunePhone: 281-876-6150Oil / Gas Purchaser: EnsercoDate: 4/23/2003Signature: Gary Brune

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: _____

Date: _____
Authorized Signature

_____ is acknowledged as the
new operator of the above named lease containing the surface pond
permitted by # _____

Date: _____
Authorized Signature

EX-108 5/1/03 MAY 05 2003 5/2/03

Must Be Filled For All Wells

* Lease Name: SHELL * Location: SW/4 NE/4

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/W/SW)	Well Status (PROD/TA/D/Abandoned)
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[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 section please indicate which section each well is located.