

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 1 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☐ Saltwater Disposal Well - Permit No.: _____
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: March 30, 2005

KS Dept of Revenue Lease No.: 33562 128432 UB

Lease Name: Black Twin #1

1505 - C - SW - SW Sec. 7 Twp. 30 R. 33 ☐ E ☒ W

Legal Description of Lease: 150 Feet South of the center of the SW
Quarter of Section 7, Township 30, Range 34 West

County: Haskell

Production Zone(s): Lemon West/Lansing B-KCA

Injection Zone(s): _____

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 OK

Past Operator's License No. 32366 exp. 9/30/03

Contact Person: Shawn or Blanche Hayden

Past Operator's Name & Address: Hayden Operating

Phone: 620-649-2670

PO Box 606, Satanta, KS 67870

Date: March 30, 2005

Title: Owner

Signature: [Signature]

New Operator's License No. 33562

Contact Person: Shawn or Blanche Hayden

New Operator's Name & Address: Hayden Operating

Phone: 620-649-2670

PO Box 606, Satanta, KS 67870

Oil / Gas Purchaser: Semcrude LP

Date: March 30, 2005

Title: Owner

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.

_____ is acknowledged as the
new operator and may continue to inject fluids as authorized by
Permit No.: _____. Recommended action: _____

Date: _____

Authorized Signature

_____ is acknowledged as the
new operator of the above named lease containing the surface pit
permitted by No.: _____

Date: _____

Authorized Signature

DISTRICT _____ EPR 11-28-06

PRODUCTION NOV 29 2008

UIC 11-29-06

Mail to: Past Operator _____ New Operator _____

District _____

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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033006_BLACK_TWIN_1.pdf

* Lease Name: Black Twin #1

* Location: 150'S C,SW,SW Sec 7, T 30, R 33W Haskell CO

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.

RECEIVED
NOV 20 2006
KCC WICHITA