KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

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

Check Applicable Boxes:	1		
✓ Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 4-1-08		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 104134		
Gas Gathering System:	Lease Name: Shaw		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
feet from DE / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: McPherson		
Number of Injection Wells**	Production Zone(s): Mississippi Chat		
Field Name: Ritz-Canton	Injection Zone(s):		
** Side Two Must Be Completed.	,		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling		
Past Operator's License No. 31302 /	Contact Person: P.J. Buck		
Past Operator's Name & Address: Jones & Buck Development	Phone: 620-725-3636		
P.O. Box 68 Sedan, KS 67361	Date: 4-1-08		
Title: Partner	//		
	Contact Person: Thomas H. Oast		
New Operator's License No. 34103 /	Contact Person: Thomas H. Oast		
New Operator's Name & Address: Lamamco Drilling Company	Phone: 620-725-3200 MAY 1 5 2000		
4444 E. 146th Street North Skiatook, OK 74070	Oil / Gas Purchaser: Coffeyville Resources CONSERVATION		
	Date: 4-1-08 WICHITA, KS		
Title: Area Manager	Signature: M. Call		
Title.	Signature.		
Acknowledgment of Transfer: The above request for transfer of injection	n authorization, surface pit permit # has been		
noted, approved and duly recorded in the records of the Kansas Corpo	ration Commission. This acknowledgment of transfer pertains to Kansas		
Corporation Commission records only and does not convey any ownership	p interest in the above injection well(s) or pit 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 pit		
Permit No.: Recommended action:	permitted by No.:		
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Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR 7-2-08	PRODUCTION JUL 0 7 2008 UIC 7-3-08		
Mail to: Past Operator New Operator	District		

Must Be Filed For All Wells

* Lease Name:	Shaw		* Location;	SW Sec 21-19S-1W	
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)
1	15-113-19217 / 06/10/31	2310 Clocke 4	950 Cicle FEUFWL	Oil	Prod
4	15-113-05670 / 01/10/38	2310 FSUFNL 3	630 FEDFWL _	Oil	Prod
6	/5-/13-02385 ^{-/} 07/30/56		585 FELFWL _	Oil .	Prod
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL _	***************************************	
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL _	14.	
		FSL/FNL	FEL/FWL _		
		FSUFNL	FEL/FWL _		
		FSL/FNL	FEL/FWL		
		FSUFNL	FEL/FWL		
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		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.