050505_Morris_1_10.pdf

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

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

| Check Applicable Boxes: | I | | |
|---|--|--|--|
| Oil Lease: No. of Oil Wells** | Effective Date of Transfer: 05/05/05 | | |
| ✓ Gas Lease: No. of Gas Wells 1 ** | KS Dept of Revenue Lease No.: 202944 | | |
| Gas Gathering System: | Lease Name: MORRIS #1-10 | | |
| Saltwater Disposal Well - Permit No.: | | | |
| Spot Location: 1320 feet from ☐ N / ✓ S Line | CSWSec. 10Twp. 21R. 33E/_W | | |
| 3960 feet from ✓ E / W Line | Legal Description of Lease: C, SW, Sec. 10-21S-33W | | |
| Enhanced Recovery Project Permit No.: | | | |
| Entire Project: Yes No | County: Finney | | |
| Number of Injection Wells** | Production Zone(s): Chase | | |
| Field Name: Hugoton | Injection Zone(s): | | |
| ** Side Two Must Be Completed. | 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 | | |
| Past Operator's License No. 31210 | Contact Person: Charles D. McMillan | | |
| Past Operator's Name & Address: Charles D. McMillan | Phone: 620-276-8850 | | |
| NA. | VPate: 05/05/05 | | |
| Title: Operator May | Signature: Charles D. Mcn. | | |
| 5217 ACC WIO | Phone: 620-276-8710 | | |
| New Operator's License No. 5317 | Contact Person: Russell Freeman | | |
| New Operator's Name & Address: | Phone: 620-276-8710 | | |
| Russell Freeman d/b/a Continental Energy | Oil / Gas Purchaser: | | |
| P.O. Box 918, Garden City, KS 67846 | Date: 05/05/05) | | |
| Title: Owner | Signature: Tussele Freeman | | |
| 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 Corpor | - · · · · · · · · · · · · · · · · · · · | | |
| Corporation Commission records only and does not convey any ownership | 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.: | | |
| Date: | Date: | | |
| Authorized Signature | Authorized Signature | | |
| 1 1 | PRODUCTION MAY 2 5 2005 UIC 5/24/205 | | |
| Mail to: Past Operator New Operator | District | | |



Side Two

Must Be Filed For All Wells

| KDOR Lease No.: 202944 | | | | | | |
|--|------------------------------|-------------|--|-------------|--------------------------------------|--|
| * Lease Name: MORRIS #1-10 | | | | | | |
| Well No. | API No. (YR DRLD/PRE '67) | | Footage from Section Line (i.e. FSL = Feet from South Line) | | Well Status (PROD/TA'D/Abandoned) | |
| 1-10 | 15-055-20333 | 1320 Circle | 3960 Circle | Gas | (shut in; TBD after transfer) | |
| | | FSL/FNL | FEL/FWL | | | |
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| | | FSL/FNL | FEL/FWL | | | |
| *********** | | FSL/FNL | FEL/FWL | | | |
| | | FSL/FNL | FEL/FWL | | | |
| | | FSL/FNL | FEL/FWL | | | |
| | | FSL/FNL | FEL/FWL | | | |
| ****** | | F\$L/FNL | FEL/FWL | | | |
| NAME OF THE OWNER, WHITE OF THE OWNER, WHITE OF THE OWNER, WHITE OWNER, WHITE OWNER, WHITE OWNER, WHITE OWNER, | | F\$L/FNL | FEL/FWL | | | |
| | | 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.