

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:	Effective Date of Transfer5/31/2007
X Oil Lease: No. of Oil Wells ***	KS Dept of Revenue Lease No.: 132877 WB
Gas Lease: No. of Gas Wells	Lease Name _ FEICHT 'A' 4-27
Gas Gathering System:	
Saltwater Disposal Well - Permit No.	
Spot Location: 560 feet from N / S Line	Legal Description of Lease:
660_ feet from E / wW Line	NW/4 Sec 27 29S 33W
Enhanced Recovery Project Permit No.:	
Entire project: Yes No	County HASKEIL
Number of injection wells	
Field NameEMON_NORTHEAST	Production Zone(s) LANSING C
** Side Two Must Be Completed.	Injection Zone(s)
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 Pit Burn Pit Settling	Haul-Off Workover Drilling
Past Operator's License No. 5952 /	Contact Person: LOU BARRY Room 27.164, WL-1
Past Operator's Name & Address	Phone (281) 366-7816
P. O. BOX 3092, HOUSTON, TX 77253	Date 5/31/2007 RECEIVED KANSAS CORPORATION COMMISSION
Title REGULATORY SUPERVISOR	Signature Lou Barry MAR 2 1 2008
New Operator's License No. 32309 /	Contact Person: RANDY VERRET CONSERVATION DIVISION WICHITA, KS
New Operator's Name & Address PRESCO WESTERN, LLC	Phone <u>(303) 444-8881</u>
5665 FLATIRON PARKWAY	Oil/Gas Purchaser (OIL) Plains Marketing LP (GAS) One OK
BOULDER, CO. 80301	Date
Title RECULATORY MANAGER	Signature
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corpo Corporation Commission records only and does not convey any ownership in	ration Commission. This acknowledgement of transfer pertains to Kansas
is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action	new operator of the above named lease containing the surface pit permitted by No.:
Date	Date
Authorized Signature	Authorized Signature
DISTRICTEPR4-21-08P	RODUCTION APR 2 1 2008 UIC 4-21-08
Mail to: Past OperatorNew Operator	District

Side Two

Must Be Filled For All Wells

KDOR Lease No	/32877	Must	Be Filled Fo	r All Wells			
* Lease Name	FEIGHT 'A'		* Lo	cation	SEC 27-2	29s-33w	
Well No.	API No. (YR DRLD/PRE '67)			age from Section Line L=Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
4-27	15-081-20813-0002	560 FNL	Circle FSL/FNL	660 FWL	Circle FEL/FWL	OIL	PROD
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
	-		FSL/FNL		FEL/FWL		
			FSL/FNL		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 for each lease. If a lease covers more than one section please indicate which section each well is located.

200 C 3 C 3 C 4