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:	Effective Date of Transfer 5/31/2007
X Oil Lease: No. of Oil Wells	KS Dept of Revenue Lease No.: 134302
Gas Lease: No. of Gas Wells	Lease Name KAYLEE BROOKE 1-35
Gas Gathering System:	
Saltwater Disposal Well - Permit No.	
Spot Location: 810 feet from N / S Line	Legal Description of Lease:
660_ feet from E E / W Line	NW/4 Sec 35 29S 40W
Enhanced Recovery Project Permit No.:	
Entire project: Yes No	County STANTON
Number of injection wells	Desduction Zene/a) OF TOTAL
Field NameLITTLE ARROW	Production Zone(s) ST. LOUIS
** 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 Diffing
Past Operator's License No. 5952 V	Contact Person: LOU BARRY Room 27.164, WL-1
Past Operator's Name & AddressBP_AMERICA_PRODUCTION CO.	Phone (281) 366-7816
P. O. BOX 3092, HOUSTON, TX 77253	3/31/2001
Title REGULATORY SUPERVISOR	Signature Lou Barry
New Operator's License No. 32309 New Operator's Name & Address PRESCO WESTERN LLO 5665 FLATTRON PARKWAY BOULDER CO. 80301	Contact Person: RANDY VERRET
New Operator's Name & Address PRESCO WESTERN LITTLE STATE OF THE STATE	Phone (303) 444-8881
5665 FLATIRON PARKWAY	G Oil/Gas Purchaser (OIL) Plains Marketing LP (GAS) One OK
BOULDER, CO. 80301	Magte 4/11/07
Title RECULATORY MANAGER	Signature Sul March
Acknowledgment of Transfer: The above request for transfer of in	jection authorization, surface pond permit # has been
noted, approved and duly recorded in the records of the Kansas Corpo	oration Commission. This acknowledgement 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	is acknowledged as the new operator of the above named lease containing the surface pit
Permit No.: Recommended action	permitted by No.:
Date:	
Date	Date Authorized Signature
	PRODUCTION
Mail to: Past Operator New Operator	District

Side Two

Must Be Filled For All Wells

SCANNE

* Lease Name	KAYLEE BROOKE		* L	ocation	SEC 35-2	9S-40W	<u> </u>
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)
1-35	15-187-20871-0000 🗸	810 FNL	Circle FSL FN	660' FEL	Circle EDFWL	OIL/	PROD-
			FSL/FNL		_ FEL/FWL		
			FSL/FNL		FEL/FWL		
			_ FSL/FNL		_ FEL/FWL		
	-		_ FSL/FNL		_ FEL/FWL		
			_ FSL/FNL		FEL/FWL		
			FSL/FNL		_ FEL/FWL		
			_ FSL/FNL		_ FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		_ FEL/FWL		
			FSL/FNL		_ FEL/FWL		
			FSL/FNL	-	FEL/FWL	A. (4	
			FSL/FNL	•	_ FEL/FWL		
			FSL/FNL		_ FEL/FWL		
			FSL/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 for each lease. If a lease covers more than one section please indicate which section each well is located.