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: June 30, 2006 | | | |
| ✓ Gas Lease: No. of Gas Wells** | KS Dept of Revenue Lease No.: 207746 | | | |
| Gas Gathering System: | Lease Name: OCKULY 2 | | | |
| Saltwater Disposal Well - Permit No.: | | | | |
| Spot Location: feet from N / S Line | <u>NENESWNE_Sec. 1</u> Twp. <u>29S_R. 37</u> ☐ E ✓ W | | | |
| feet from E / W Line | Legal Description of Lease: | | | |
| Enhanced Recovery Project Permit No.: | T29S R37W, Sec. 1, C NE 3889 North, 1391 West, from SE corne | | | |
| Entire Project: Yes No | County: Grant | | | |
| Number of Injection Wells** | Production Zone(s): Council Grove Group | | | |
| Field Name: Panoma Gas Area | | | | |
| ** Side Two Must Be Completed. | Injection Zone(s): | | | |
| \$60.00 Californ Proc 1998 (68) 888 (68) 990 500 California (1998 1998) (1998 1990 1990 1990 1990 1990 1990 1990 | | | | |
| Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) | feet from N / S Line of Section | | | |
| (AFTING, II DIMENIA, 110 OF MALLY | feet fromE / W Line of Section | | | |
| Type of Pit: Emergency Burn Settling | Haul-Off Workover Drilling | | | |
| Past Operator's License No. 4782 | Contact Person:Joyce Watts | | | |
| Past Operator's Name & Address: Medicine Bow Operating Company | Phone: (713) 420-3514 | | | |
| | | | | |
| 1001 Louisiana Street, Houston, TX 77002 | Date: June 26, 2006 | | | |
| Title: Sr. Regulatory Analyst | Signature: Jaya Natto | | | |
| | <i>U</i> V | | | |
| New Operator's License No. IBD 33812 / | Contact Person: Jamie Robinson | | | |
| New Operator's Name & Address: El Paso E&P Company, L.P. | Phone: (713) 420-4634 | | | |
| 1001 Louisiana Street, Houston, TX 77002 | Oil / Gas Purchaser: | | | |
| | Date: June 26, 2006 | | | |
| RECEIVED | 1000 | | | |
| Title: Sr. Regulatory Analyst | Signature: | | | |
| JUL_0 5 2006 | | | | |
| Acknowledgment of Transfer: The above request for transfer of injection | | | | |
| noted, approved and duly recorded in the records of the the population of the records of the population of the populatio | oration Commission. This acknowledgment of transfer pertains to Kansas | | | |
| Corporation Commission records only and does not convey any ownership | | | | |
| | T | | | |
| 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.: | | | |
| | portinuos by rec. | | | |
| Date: | Date: | | | |
| Authorized Signature | Authorized Signature | | | |
| DISTRICTEPR 7-21-06 | PRODUCTION JUL 2 4 2006 uic 7-2/-06 | | | |
| Mail to: Past Operator New Operator | District | | | |

Side Two

Must Be Filed For All Wells

| * Lease Name: OCKULY 2 | | | | T29S R37W, Sec. 1, C NE 3889 North, 1391 West, from SE corner | | | |
|------------------------|------------------------------|---|---------|---|--------------------------------------|----|--|
| * Lease Name | : OCKULY 2 | | *1 | Location: | 000, 110111 02 0011101 | | |
| 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 | | 3889 Circle | 1391 | Circle _ELJFWL | Gas | TA | |
| | | 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 | | | |
| | | FSL/FNL | | _ FEL/FWL | | | |
| | | FSL/FNL | | _ FEL/FWL | | | |
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| | | | | | | | |
| | | | | _ FEL/FWL | | | |
| | RE | | | | | | |
| | | | | | | | |
| | | _ | | | | | |
| | KCC | VVICHITA | | _ FEL/FWL | | | |
| | | | | _ FEL/FWL | | | |
| | | | <u></u> | | | | |

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.