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:			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: JULY 1, 2004		
Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: 207459		
Gas Gathering System:	Lease Name: HASKINS		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	<u>W/2</u> - <u>E/2</u> - <u>SE/-</u> - <u>Sec. 9</u> Twp. <u>35 S</u> R. <u>4</u> ✓ E W		
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: COWLEY		
Number of Injection Wells**	Production Zone(s): MISSISSIPPI DEC 13 200		
Field Name: COPELAND			
** Side Two Must Be Completed.	Injection Zone(s): KCC WCHI		
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. 4365	Contact Person: ROBERT J. ANSTINE		
Past Operator's Name & Address: ANSTINE-MUSGROVE OIL CO	Phone: 620-442-2615		
P O BOX 391, PONCA CITY, OK 74602-0391	Date: 11-15-04		
MANACINIC DARTNER			
Title: MANAGING PARTNER	Signature: All Human		
20405	DODEDT LANGTINE		
New Operator's License No. 33405	Contact Person: ROBERT J. ANSTINE		
New Operator's Name & Address: ANSTINE & MUSGROVE, INC	Phone: 620-442-2615		
P O BOX 391	Oil / Gas Purchaser: SEMCRUDE		
PONCA CITY, OK 74602-0391	Date: 11-55-04		
Title: SECRETARY	1/		
Title: OLONE FAIT	Signature: Multi-		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #has been		
	pration Commission. This acknowledgment of transfer pertains to Kansas		
Corporation Commission records only and does not convey any ownershi	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.:		
	, some system		
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR 12/17/04	PRODUCTION DEC 2 0 2004 UIC 12/20/04		
Mail to: Past Operator New Operator	District		



Side Two

Must Be Filed For All Wells

Lease Name	HASKINS		* Location:	SEC 9 - 35S- 4E	
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	15-035-20-645-200	4950 Circle	4280 Circle	GAS	PROD
		FSL/FNL	FEL/FWL		- <u> </u>
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	. / 	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWI		
	_	FSL/FNL	FEL/FWI	-	-
	- and -	FSL/FNL	FEL/FWI		
		FSL/FNL	FEL/FWI		- A
		FSL/FNL	FEL/FW		
		FSL/FNL	FEL/FW		
			FEL/FW		
		FSL/FNL	FEL/FW	L	
				5. 300 (B.E.P.)	
				L	
			FEL/FW		
i i			FEL/FW		
		FSL/FN	FEL/FW	/L	
		FSL/FN	FEL/FW	Λ <u></u>	
		FSL/FN	FEL/FV	r <u> </u>	
		FSL/FN	L FEL/FV	Λ	
-		FSL/FN	L FEL/FV	VL	

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.