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:					
Oil Lease: No. of Oil Wells1	Effective Date of Transfers 7-5-2006				
Gas Lease: No. of Gas Wells	Zincouve Date of Harister.				
Gas Gathering System:	KS Dept of Revenue Lease No.: 137356				
Saltwater Disposal Well - Permit No.:	Lease Name: Driscoll MB				
Spot Location:feet from N/ S Line	SE Sec. 32 Twp. 14 R. 14 EXX W				
feet from E / W Line	Legal Description of Lease: N/2 SE/4				
Enhanced Recovery Project Permit No.:	5 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
Entire Project: Yes No	Puggall				
Number of Injection Wells	County: Russell				
Field Name:	Production Zone(s): Arbuckle				
** \$ide Two Must Be Completed.	Injection Zone(s):				
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	feet from N / S Line of Section feet from E / W Line of Section Haul-Off Workover Drilling				
/ /	- Diming or				
Past Operator's License No. 6622 of .6/30/06 Contact Person: James L. Schoenberger					
Past Operator's Name & Address: Jason Cil Company	Phone: 785-483-4204				
P. O. Box 701, Russell, KS 67665-0701	Date: 9-13-2006				
Title: Owner	Signature Jemy the longer				
New Operator's License No. 33813	Contact Person: James L. Schoenberger				
New Operator's Name & Address: Jason Cil Company, LLC	Phone: 785-483-4204				
P. O. Box 701, Russell, KS 67665-0701					
	Oil / Gas Purchaser Plains Marketing, LP				
0 -	Date: 9-13-2006				
Fitle: Owner	Signature: June 1 Selection				
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corpor Corporation Commission records only and does not convey any ownership	ration Commission. This acknowledgment of transfer pertains to Kansas				
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.:				
)ata:					
Date:	Date:				
10 10 A/	PRODUCTION OCT 1 9 2008 UIC 10-19-5 ECEIVED				
Mail to: Past Operator New Operator	District				
	District				



Side Two

Must Be Filed For All Wells

* Lease Name: _	Driscoll		* Location: 80 * }	N 870 W SE NE	SE Sec. 32-14-14
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	15-167-23 322 -0000	Circle 1730 FSUFNL	Circle 400 FEV FWL _	Oil	Prod.
		FSL/FNL _	FEL/FWL		
		FSL/FNL _	FEL/FWL		
	-	FSL/FNL _	FEL/FWL		
	<u> </u>	FSL/FNL _	FEL/FWL _		
		FSL/FNL _	FEL/FWL		
	<u> </u>				
		FSL/FNL	FEL/FWL _		
		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 two for each lease. If a lease covers more than one section please indicate which section each well is located.