

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form T-1

June 2000

Form must be Typed

Form must be Signed

All blanks must be Filled

REQUEST FOR CHANGE OF OPERATOR  
TRANSFER OF INJECTION OR SURFACE POND PERMIT

RECEIVED

Check Applicable Boxes:

DOR 213568 JUL 21 2003  
☐ Oil Lease: No. of Wells \_\_\_\_\_  
☒ Gas Lease: No. of Wells 1 KCC WICHITA  
 \*\* Side Two Must Be Completed.  
☐ Saltwater Disposal Well - Docket No. \_\_\_\_\_  
 Spot Location: \_\_\_\_\_ feet from N / S Line  
 \_\_\_\_\_ feet from E / W Line  
☐ Enhanced Recovery Project Docket No. \_\_\_\_\_  
 Entire Project: ☐ Yes ☐ No  
 Number of Injection Wells \_\_\_\_\_  
 Field Name: Alford

Effective Date of Transfer: 7-14-2003Lease Name: CroweSec. 32 Twp. 30S R. 18 ☐ E ☒ WLegal Description of Lease: NW/4 Section 32-30S-18WCounty: KiowaProduction Zone(s): Mississippian

Injection Zone(s): \_\_\_\_\_

Surface Pond Permit # \_\_\_\_\_  
(API # if Drill Pit)\_\_\_\_\_ feet from N / S Line of Section 40E  
\_\_\_\_\_ feet from E / W Line of SectionIdentify: ☐ Emergency Pit ☐ Burn Pit ☐ Storage Pit ☐ Drill PitPast Operator's License No. 32460 ✓Contact Person: Wendell UnruhPast Operator's Name & Address: Wendell Unruh  
Hc 66 Box 1A Wilmore KSPhone: 620-738-4337Title: owner-operatorDate: 7-1-03Signature: Wendell UnruhNew Operator's License No. 33270 ✓Contact Person: Wendell UnruhNew Operator's Name & Address: HDH Resources Inc  
Hc 66 Box 1APhone: 620-738-4337Wilmore KS 67155Oil / Gas Purchaser: PlainsTitle: PresidentDate: 7-14-03Wendell Unruh - ownerSignature: Wendell Unruh

**Acknowledgment of Transfer:** The above request for transfer of injection authorization, surface pond permit # \_\_\_\_\_ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pond permit.

\_\_\_\_\_ is acknowledged as the  
new operator and may continue to inject fluids as authorized by  
Docket # \_\_\_\_\_ Recommended action: \_\_\_\_\_

Date: \_\_\_\_\_  
Authorized Signature

\_\_\_\_\_ is acknowledged as the  
new operator of the above named lease containing the surface pond  
permitted by # \_\_\_\_\_

Date: \_\_\_\_\_  
Authorized Signature

7/22/03 JUL 23 2003 JIC 7/23/03

\* Lease Name: Crowe \* Location: 32 305 18w

***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.