

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 2 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☐ Saltwater Disposal Well - Permit No.: _____
Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: Leavenworth

**** Side Two Must Be Completed.**

Effective Date of Transfer: Aug 1, 2006
KS Dept of Revenue Lease No.: 124661 *MB*
Lease Name: Edmund Theis

NW Sec. 19 Twp. 8S R. 22 ☒ E ☐ W
Legal Description of Lease: NW/4 Sec 19 T8S R22E

County: Leavenworth
Production Zone(s): McLouth
Injection Zone(s): _____

Surface Pit Permit No.: N/A
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ Drilling *OK*

Past Operator's License No. 30329 ✓
Past Operator's Name & Address: Thomas Well Service
P.O. Box 97, McLouth, KS 66054
Title: President

_____ feet from ☐ N / ☐ S Line of Section
_____ feet from ☐ E / ☐ W Line of Section

Contact Person: Bobby G. Thomas

Phone: (913) 758-0175

Date: 8-9-06

Signature: *Del A. Thomas, Pres.*

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New Operator's License No. 32064 ✓
New Operator's Name & Address: Monument Resources, Inc.
P.O. Box 1450, Castle Rock, CO 80104
Title: President

Contact Person: A.G. Foust

Phone: (303) 692-9468

Oil / Gas Purchaser: COG TRANSMISSION Corporation

Date: 08-09-06

Signature: *A.G. Foust*

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # N/A 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 pit permit.

_____ is acknowledged as the
new operator and may continue to inject fluids as authorized by
Permit No.: _____. Recommended action: _____

Date: _____

Authorized Signature

_____ is acknowledged as the
new operator of the above named lease containing the surface pit
permitted by No.: _____

Date: _____

Authorized Signature

DISTRICT _____

EPR 10-2-06

PRODUCTION NOV 02 2006

UIC 11-2-06

Mail to: Past Operator _____

New Operator _____

District _____

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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* Lease Name: Edmund Theis

* Location: Sec 19 T8S R22E

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* 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.