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

Check Applicable Boxes:	Effective Date of Transfer:		
Oil Lease: No. of Wells**			
Gas Lease: No. of Wells_1**	Lease Name: Sauer B1		
"* Side Two Must Be Completed.	Legal Description of Lease: NW/NE/SW Sec. 15-T23S-R37W		
Saltwater Disposal Well - Docket No.			
Spot Location: feet from N / S Line			
feet from E / W Line			
Enhanced Recovery Project Docket No	Koarny		
Entire Project: Yes No	County: Kearny		
Number of Injection Wells***	Production Zone(s): Chase		
ield Name: Hugoton	Injection Zone(s): none		
Surface Pond Permit #	feet from N / S Line of Section		
(API # If Drill Pit)	feet from E / W Line of Section		
Identify: Emergency Pit Burn Pit	Storage Pit Drill Pit		
Past Operator's License No. 32824 /	Contact Person: Wayne King		
Past Operator's Name & Address: Barrett Resources Corporation	Phone: 620-355-7838		
P.O. Box 383 Lakin, KS 67860	Date: August 30, 2001		
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Title: District Manager	Signature: Wayne K.		
New Operator's License No. 32909	Contact Person: Don K. Wilken		
New Operator's Name & Address:	Phone: 620-355-7838		
Williams Production RMT Company	Oil / Gas Purchaser: Oneok		
P.O. Box 383 Lakin, KS 67860	Date: August 30, 2001 SEP 1 3 2001		
Title: Engineering Technician	Signature: Don K. Wilken KCC WICHITA		
noted, approved and duly recorded in the records of the Kansas Cor	on authorization, surface pond permit # has been poration Commission. This acknowledgment of transfer pertains to Kansa		
Corporation Commission records only and does not convey any owners	snip litterest in the above injection well(s) of point permit.		
is acknowleged as the	is acknowleged as th		
new operator and may continue to inject fluids as authorized by	new operator of the above named lease containing the surface pon		
Docket # Recommended action:	permitted by #		
Date:			
11/19/01 PROD 2 7 2001 Authorized Signature UIC 11/91	Authorized Signature		





Must Be Filed For All Wells

* Lease Name:	API No. (YR DRLD/PRE '67)	* Location: NW/NW/SW Sec. 15-T23S-R37W			
Well No.		Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oll/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-093-00164 V 1956	2490 Circle	2990 Circle	Gas	Prod
		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	FEUFWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEUFWL		
		FSL/FNL	FEUFWL	· · · · · · · · · · · · · · · · · · ·	
		FSL/FNL	FEUFWL		
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		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		

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.