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OCT 31 2005

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

KCC WICHITA

REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION OR SURFACE POND PERMITForm T-1
June 2000
Form must be Typed
Form must be Signed
All blanks must be Filled

DOR 123967 MB

Check Applicable Boxes:

☒ Oil Lease: No. of Wells 7 **☐ Gas Lease: No. of Wells _____ **

** 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: UKEffective Date of Transfer: 9/1/2005Lease Name: JOHN LINNEBURLOTS 9, 10, 15, 16 Sec. 7 Twp. 32S R. 17 ☒ E ☐ WLegal Description of Lease: LOTS 9, 10, 15, 16 EXCEPT3.16 ACRES TO UNION TRACTION CO. &EXCEPT 2.7 ACRES TO CITY OF CHERRYVALE
IN LOT 9 APPROXIMATELY 130.48 ACRESCounty: MONTGOMERY CO.Production Zone(s): BARTLESVILLE

Injection Zone(s): _____

Surface Pond Permit # _____

(API # If Drill Pit)

_____ feet from N / S Line of Section

_____ feet from E / W Line of Section

Identify:

☐ Emergency Pit☐ Burn Pit☐ Storage Pit☐ Drill PitPast Operator's License No. # 7208 ✓Past Operator's Name & Address: LORAIN CLEAVER OIL700 TEXAS ROAD COLONY, KANSAS 66015Title: OWNERContact Person: BETTY THORNHILLPhone: 620-365-2515Date: 10/18/2005Signature: XX Loraine CleaverNew Operator's License No. # 30925 ✓New Operator's Name & Address: YOCHAM OIL LLC870 WEST VIRGINIA ROADCOLONY, KANSAS 66015Title: OWNERContact Person: DARRELL YOCHAMPhone: 620-365-1775 OR 620-365-5645Oil / Gas Purchaser: PLAINSDate: 10/18/2005Signature: XX Darrell Yocham

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

Must Be Filed For All Wells

* Lease Name: JOHN LINNEBUR

* Location: LOTS 9, 10, 15, 16 SEC 7 T32S R17E

SW/4 of

[illegible]

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.