## 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 Wells**	Effective Date of Transfer: 9-1-2006			
Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: 225915			
Gas Gathering System:	Lease Name: Stanley			
Saltwater Disposal Well - Permit No.:	SW _ SE _ NE _ NE Sec. 3 Twp. 26 S R. 20  ▼ E W			
Spot Location: feet from N / S Line	•			
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County: Allen			
Number of Injection Wells**	Production Zone(s): Tucker Sand			
Field Name: Cherokee Basin Coal Area	Injection Zone(s):			
** Side 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			
Past Operator's License No. 33239 Jpp 5/30/07	Contact Person: Gary Cox			
Past Operator's Name & Address: River Gas Chanute, LLC	Phone: (205) 752-3339			
P.O. Box 20057, Tuscaloosa, AL 35402	4/11/07			
P.O. Box 20057, Tuscaloosa, AL 55402	Date:			
Title: Business Manager	Signature:			
New Operator's License No. 32912 /	Contact Person: Terry Carroll			
	Phone: (620) 332-1600			
New Operator's Name & Address: Carroll Energy, LLC 200 Arco Place, Suite 230 - Box 149				
	Oil / Gas Purchaser:			
Independence, Kansas 67301	Date: 4/ (/)			
Title: of army Kinger	Signature:			
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corpo 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 RECEIVED			
Permit No.:	permitted by No.:			
Date:	Date:			
Authorized Signature	Date:Authorized Six GC WICHITA			
DISTRICTEPR2_7-08	PRODUCTION FEB 0 4 2008 UIC 2-1-08			
Mail to: Past OperatorNew Operator	District			

KANSAS CORPORATION COMMISSION

APR 2 5 2007

## Side Two

## Must Be Filed For All Wells

* Lease Name:		* Lease Name: Stanley				* Location: NE/4 Section 3, T-26-S, R-20-E			
			Location	n:					
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)			
A4-3	15-001-29175-00-00 / 1,	000 Circle FSL/FND	550 Circle		Gas	Prod			
		FSL/FNL	FEL/F	WL _					
		FSL/FNL	FEL/F	-WL					
		FSL/FNL	FEL/F	WL _					
		FSL/FNL	FEL/F	=WL _	All and the second second second				
		FSL/FNL	FEL/F	=WL _					
		FSL/FNL	FEL/F	FWL _	**************************************				
		FSL/FNL	FEL/F	FWL _					
		FSL/FNL	FEL/F	FWL	Marghage gray and the Market Laborator As 41 are				
		FSL/FNL	FEL/F	FWL _					
		FSL/FNL	FEL/F	FWL _					
		F\$L/FNL	FEL/F	FWL					
		FSL/FNL	FEL/F	FWL _					
		FSL/FNL	FEL/f	FWL _					
		FSL/FNL	FEL/F	FWL					
		FSL/FNL	FEL/F	FWL _					
		FSL/FNL	FEL/I	FWL _					
		FSL/FNL	FEL/I	FWL _					
		FSL/FNL	FEL/I	FWL _					
		FSL/FNL	FEL/I	FWL					
		FSL/FNL	FEL/I	FWL _		RECEIVED			
		FSL/FNL	FEL/I	FWL _					
		FSL/FNL	FEL/I	FWL _					

A separate sheet may be attached if necessary

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<sup>\*</sup> 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.

\*\*RECEIVED\*\*

\*\*CANSAS CORPORATION COMMISSION\*\*