

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:

☐ Oil Lease: No. of Wells _____☒ Gas Lease: No. of Wells 1

** 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: _____

Effective Date of Transfer: 10-20-03Lease Name: TinsleySec. 5 Twp. 20s R. 1 ☐ E ☒ W

Legal Description of Lease: _____

West half of the SoutheastQuarter (W/2 SE/4)County: McPherson CoProduction Zone(s): Mississippian

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. 32778Past Operator's Name & Address: CAT Energy LLCP.O. Box 175 Galva KS 67443Title: OwnerContact Person: Lee NightingalePhone: 620/654-6288 H- 620/654 3262Date: 10-23-03Signature: Rick Nightingale PresNew Operator's License No. 32081New Operator's Name & Address: Smokey Valley ResourcesP O Box 305 Chase KS 67524Title: Pres.Contact Person: George SalingPhone: 620 938 2470Oil / Gas Purchaser: MAC County GasDate: 10-23-03Signature: George Saling

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

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

2/6/04 FEB 06 2004

2/6/04

Must Be Filed For All Wells

* Lease Name:

Tinsley

* Location:

McPherson Co Ks.

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)

[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.