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:	1				
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 11-1-06				
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 11597				
Gas Gathering System:	1 1 12				
Saltwater Disposal Well - Permit No.:	Lease Name: Bryan -B Sw - NW - SE - Sec. 23 Twp. 19W R. 1 EVW				
Spot Location:feet from N / S Line	Sec. 23 Twp. 19W R. 1 EVW				
feet from E / W Line	Legal Description of Lease: 480' FWL 1960' FNL SE				
Enhanced Recovery Project Permit No.:	Section 23- Twp 19W R1W				
Entire Project: Yes No	County: McPherson, KS				
Number of Injection Wells**	1				
Field Name: Bitikofer	Production Zone(s): MISS				
** 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. 05736 etp. 6/35/06	Contact Person: Dorothy J Bryan				
/ /					
Past Operator's Name & Address: Dorothy Bryan	Phone: 620-628-4937				
P.O. Box 25 Canton, KS 67428	Date: 11-1-06				
Title:	Signature: 1004 of the Stryan				
New Operator's License No. 30280	Contact Person: Bud Davis				
New Operator's Name & Address: Sunflower Will Service	Phone: 620-628-4723				
P.O. Box 341 Canton, KS 67428	Oil / Gas Purchaser: American Energies				
Title: Owner	Date: 11-1-06 Signature: Such Signature				
Acknowledgment of Transfer: The above request for transfer of injection	n authorization, surface pit permit # has been				
noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownershi	pration Commission. This acknowledgment of transfer pertains to Kansas				
	The second injection in the partition				
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 contain RECEIVALD				
Permit No.: Recommended action:	permitted by No.: NOV 2 1 2008				
Date:	Date: KCC WICHITA				
Authorized Signature	Authorized Signature				
DISTRICTEPR//-27-06	PRODUCTION NOV 2 8 2006 UIC 11-28-06RECEIVED				
Mail to: Past Operator New Operator	District				

Side Two

Must Be Filed For All Wells

* Lease Name: Bryan -B		* Location: S	W NW SE	T 19s R1w		
Well No.	API No. (YR DRLD/PRE '67)	Footage from <u>Section</u> Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)		Well Status (PROD/TA'D/Abandoned
1	15-113-20440 -	3630' 1060' Circle ESL/FNI	2970 Circle	Gas	-MO-VO	Abandoned
		1580 (FSL)	/	a Dist#2		
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		, <u>.</u>	
		FSL/FNL	FEL/FWL		- · · · · · · · · · · · · · · · · · · ·	
		FSL/FNL	FEL/FWL	***************************************		
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	**************************************		-7-04-94-04
		FSL/FNL	FEL/FWL	*******		
···		FSL/FNL	FEL/FWL		H. Titte Villa III	
M1001207.		FSL/FNL	FEL/FWL			
TOTAL BASE AND		FSL/FNL	FEL/FWL			***
		FSL/FNL	FEL/FWL	***************************************		
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		FSL/FNL	FEL/FWL			***************************************
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		FSL/FNL	FEL/FWL	**************************************		
	11-3	FSL/FNL	FEL/FWL			
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	<u> </u>	FSL/FNL	FEL/FWL	***************************************		RECEIVED
		FSL/FNL	FEL/FWL			NOV 2 1 2008
A separate sh	eet may be attached if necessary					KCC WICHITA RECEIVED

* When transferring a unit which consists of more than one lease please file a separate side two for each lease. If a lease covers were than an application of the second second

KCC WICHITA