## 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: 12-1-06			
Gas Lease: No. of Gas Wells** KS Dept of Revenue Lease No.: 105668				
Gas Gathering System:	Lease Name: Bales			
✓ Saltwater Disposal Well - Permit No.: D-17029				
Spot Location: 2970 feet from N / ✓ S Line	Sec. /4 Twp. 8 R. 14 EVW			
feet from ✓ E / W Line	Legal Description of Lease: W/2 NE/4, NW/4, & W/2 SW/4 of Sec 14,			
Enhanced Recovery Project Permit No.:	E/2 E/2 of Sec 15			
Entire Project: Yes No	County: Osborne			
Number of Injection Wells**	Production Zone(s): Shawnee-Tarkio			
Field Name: Kill Creek				
** Side Two Must Be Completed.	Injection Zone(s): Oedervale CFI ( edur H 1115			
Surface Pit Permit No.: P01466	feet fromN / 🗸 S Line of Section			
(API No. if Drill Pit, WO or Haul)	feet from ✓E / W Line of Section			
Type of Pit: ✓ Emergency Burn Settling	Haul-Off Workover Drilling			
Past Operator's License No. 4419	Contact Person: Dick Schremmer			
Past Operator's Name & Address: Bear Petroleum, Inc.	Phone: 316-524-1225			
P.O. Box 438, Haysville, KS 67060	Date: 11-30-06			
Drooident				
Title: President	Signature:			
New Operator's License No. 5610	Contact Person: LONNY BRUCE			
New Operator's Name & Address: Bruce Oil Company, LLC	Phone: 620-241-2938			
1704 Limestone Rd.	Oil / Gas Purchaser: Coffeyville Resources			
McPherson, KS 67460-6500	Date: 12/4/06			
Title: Operating Monager	Signature: Sommytruse.			
Acknowledgment of Transfer: The above request for transfer of injection				
Corporation Commission records only and does not convey any ownership	pration Commission. This acknowledgment of transfer pertains to Kansas printerest in the above injection well(s) or pit permit.			
3ruce Cil Company, LLC is acknowled as the	Bruce Oil Company Usacknowleged as the			
new operator and may continue to inject fluids as authorized by	The second of the sheet and the second secon			
Permit No. 17,029 . Recommended action: None	permitted by No.: P0/966			
Date: 12-12-06 Barbara Montana Authorized Signature	DEC 0 5 200 Date: 12/12/06 San le Recevich Authorized Signature CWICH			
10/10/	PRODUCTION DEC 1 2 2006 UIC 12-12-06 (*)			
Mail to: Past Operator 12-12-06 New Operator 12-	12-06 District 412-12-06			

## Side Two

## Must Be Filed For All Wells

KDOR Lease	No.: 105668				
* Lease Name:	Bales		* Location:		
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet	Section Line from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1 14	15-141-20018	4950 Circle	330 Circle	Oil	Prod
2 14	15-141-00054-00-01	2970 FSIVENL	4926 4950 FEVFWL	SWD /	Active I
3 15	15-141-20031	990 (FSUFNL	330 FEIVFWL	Oil	Prod
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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A separate sheet may be attached if necessary

<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.