

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

REQUEST FOR CHANGE OF OPERATOR  
TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form T-1  
April 2004  
Form must be Typed  
Form must be Signed  
All blanks must be Filled

Check Applicable Boxes:

- ☒ Oil Lease: No. of Oil Wells 1 \*\*  
☐ Gas Lease: No. of Gas Wells \_\_\_\_\_ \*\*  
☐ Gas Gathering System: \_\_\_\_\_  
☐ Saltwater Disposal Well - Permit No.: \_\_\_\_\_  
Spot Location: \_\_\_\_\_ feet from ☐ N / ☐ S Line  
\_\_\_\_\_ feet from ☐ E / ☐ W Line  
☐ Enhanced Recovery Project Permit No.: \_\_\_\_\_  
Entire Project: ☐ Yes ☐ No  
Number of Injection Wells \_\_\_\_\_ \*\*

Field Name: \_\_\_\_\_

**\*\* Side Two Must Be Completed.**

Effective Date of Transfer: 12/12/06  
KS Dept of Revenue Lease No.: 137345 MB  
Lease Name: Alvin  
\_\_\_\_\_ NW/4 \_\_\_\_\_ Sec. 26 Twp. 9 R. 26 ☐ E ☒ W  
Legal Description of Lease: NW/4  
County: Sheridan  
Production Zone(s): \_\_\_\_\_  
Injection Zone(s): \_\_\_\_\_

Surface Pit Permit No.: \_\_\_\_\_  
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling

☐ Haul-Off ☐ Workover ☐ Drilling or

Past Operator's License No. 9860 ✓  
Past Operator's Name & Address: Castle Resources Inc.  
PO Box 87, Schoenchen, KS 67667  
Title: President

Contact Person: Jerry Green  
Phone: (785) 625-5155  
Date: 12-12-06  
Signature: [Signature]

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New Operator's License No. 30076 ✓  
New Operator's Name & Address: A & A PRODUCTION  
PO BOX 100  
HILL CITY KS 67642  
Title: OWNER

Contact Person: ANDY ANDERSON  
Phone: 785-421-6266  
Oil / Gas Purchaser: NCRA  
Date: 12-12-06  
Signature: [Signature]

**Acknowledgment of Transfer:** The above request for transfer of injection authorization, surface pit 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 pit permit.

\_\_\_\_\_ is acknowledged as the  
new operator and may continue to inject fluids as authorized by  
Permit No.: \_\_\_\_\_. Recommended action: \_\_\_\_\_  
Date: \_\_\_\_\_

\_\_\_\_\_ is acknowledged as the  
new operator of the above named lease containing the surface pit  
permitted by No.: \_\_\_\_\_

Date: \_\_\_\_\_ Authorized Signature \_\_\_\_\_

DISTRICT \_\_\_\_\_ EPR 2-1-07 PRODUCTION FEB 05 2007 UIC 2-5-07  
Mail to: Past Operator \_\_\_\_\_ New Operator \_\_\_\_\_ District \_\_\_\_\_

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

\* Lease Name: Alvin \* Location: \_\_\_\_\_

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\* 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.