

NOV 17 2008

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form 1-1
April 2004
Conservation Division
WICHITA, KS 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 _____
☐ 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: School Creek

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

Effective Date of Transfer 12-01-07
 KS Dept of Revenue Lease No: 102846
 Lease Name: Bartelsville
 Sec 3 Twp 32 R 7 E
 Legal Description of Lease SE 1/4 4 E 1/4
S.W. 1/4
 County: Cowley
 Production Zone(s): Bartelsville
 Injection Zone(s): _____

Surface Pit Permit No. _____ feet from _____ N / _____ S Line of Section
 (API No. if Drill Pit, WD or Haul) _____ feet from _____ E / _____ W Line of Section
 Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☒ Drilling

Past Operator's License No 316741
 Past Operator's Name & Address Joe Burke
33527 5th Rd Lathum, KS 67072
 Title President

Contact Person Joe Burke
 Phone 620-945-2297
 Date 12-10-07
 Signature: Joe Burke

New Operator's License No 337111
 New Operator's Name & Address B-C Steel
209 N. Fry
Yates Center, KS 66783
 Title _____

Contact Person Bob Lucken
 Phone 620-625-2999
 Oil / Gas Purchaser: Pharm
 Date 12-10-07
 Signature: Bob Lucken

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 #2 12-22-08 EPR 12-23-08 PRODUCTION DEC 28 2008 UIC 12-24-08
 Mail to: Past Operator _____ New Operator _____ District _____

Must Be Filed For All Wells

KDOR Lease No.: _____

* Lease Name: Bayer B * Location: SE/4 & E/2 SW/4

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)
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[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.