

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 _____ **
- ☒ Gas Lease: No. of Gas Wells 1 **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ S Line
_____ feet from ☐ E Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells: _____ **
- Field Name CLARK CREEK

****Side Two Must Be Completed**

Effective Date of Transfer: 10/22/2009

KS Dept of Revenue Lease No.: _____ 209775 ☒ W

Lease Name: Arnold 1-33 Unit

Sec: 33 Twp: 34 R: 22 ☐ E ☒ W

Legal Description of Lease: 1/2 of Sec. 33
1/2 of Sec. 34

County: Clark

Production Zone(s): MORROW

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. 5363 ✓

Past Operator's Name and Address: BEREXCO Inc.

PO Box 20380 Wichita, KS 67208

Title: Production Manager

Contact Person: Emma Richmond

Phone: 316-265-3311

Date: 12/04/2009

Signature: Emma Richmond

New Operator's License Number: 34318 ✓

New Operator's Name and Address: Berexco LLC

P.O. Box 20380 Wichita, KS 67208

Title: Production Manager

Contact Person: Emma Richmond

Phone: 316-265-3311

Oil / Gas Purchaser: Redurning Gas

Date: 12/04/2009

Signature: Emma Richmond

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface 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: _____

Authorized Signature _____

_____ is acknowledged as the
new operator of the above named lease containing the surface pit
permitted by No.: _____. Recommended action: _____

Date: _____

Authorized Signature _____

DISTRICT _____ EPR 2-15-10 PRODUCTION 2/16/10 UIC 2-15-10

Mail to: Past Operator _____ New Operator _____ District _____

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

RECEIVED
RECEIVED
JAN 22 2010
KCC WICHITA

RECEIVED
DEC 07 2009
KCC WICHITA

102209_Arnold_1_33_Unit.pdf

Must Be Filed For All Wells

KDOR Lease No.: 209775

*Lease Name: Arnold 1-33 Unit

*Location:

S/2 of Sec 33

S/2 of Sec 34

33-34-22 W

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)
1-33	15025200760000 ✓	1320 FSL 1320 ✓ FEL	GAS	PROD Sec 33

RECEIVED

JAN 27 2010

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RECEIVED

DEC 07 2009

KCC WICHITA

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.