

**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 2 **
- 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 Spivey-Grabs-Basil

****Side Two Must Be Completed**

Effective Date of Transfer: 10/01/2009 10-22-09

KS Dept of Revenue Lease No.: 126893 ✓ NB 204687 ✓ NB

Lease Name: Gwynn-Render Lease

Sec: 1 Twp: 30 R: 8 E W

Legal Description of Lease: S/2

County: Kingman

Production Zone(s): MISS

Injection Zone(s): _____

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Surface Pit Permit No. _____ feet from N / 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 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: 11/24/09

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: Central Crude Corporation / Redwing Gas

Date: 11/24/09

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 2-2-10 PRODUCTION 2/3/10 UIC 2-2-10

Mail to: Past Operator _____ New Operator _____ District _____

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

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Must Be Filed For All Wells

KDOR Lease No.: 126893 204687

*Lease Name: Gwynn-Render Lease *Location: S/2 1 - 30 - 8 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)
<i>A</i> 1	15095006060000 ✓	2310	FSL	3630	FEL	GWC Gas TA
<i>A</i> 2	15095006070000 ✓	1650	FSL	2310	FEL	GWC Gas PROD

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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.