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. | | | | |
|---|---|--|--|--|
| X Oil Lease: No. of Oil Wells 4 ** | Effective Date of Transfer: | | | |
| Gas Lease: No. of Gas Wells** | KS Dept of Revenue Lease No.: 139010 | | | |
| Gas Gathering System: | Lease Name: Miller | | | |
| Saltwater Disposal Well - Permit No.: | | | | |
| Spot Location: feet from N / S Line | Legal Description of Lease: NE/4 of Section 21-22S-22W | | | |
| feet from E / W Line | Legal Description of Lease: | | | |
| Enhanced Recovery Project Permit No.: | | | | |
| Entire Project: Yes No | County: Hodgeman | | | |
| Number of Injection Wells** | Production Zone(s): Mississippi & Marmaton | | | |
| Field Name: | Injection Zone(s): | | | |
| ** Side Two Must Be Completed. | | | | |
| 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 | | | |
| Past Operator's License No. 9860 / | Contact Person: JERRY CREEN | | | |
| Past Operator's Name & Address: Castle Resources Inc | Phone: 785- 625-5155 | | | |
| P.O. Box 87 Schoenchen, KS 67667 | Date: 12/1/5/109 | | | |
| Title: PRESIDENT | Signature: | | | |
| Title: TROTUCAL | Signature. | | | |
| New Operator's License No31302 ✓ | Contact Person: P J Buck RECEIVED | | | |
| New Operator's Name & Address: | Phone: 620-725-3636 JAN 2 2 2010 | | | |
| Jones & Buck Development | Plains | | | |
| P.O. Box 68 Sedan, KS 67361 | Oil / Gas Purchaser: 1101113 KCC WICHITA | | | |
| | SAV Kill | | | |
| Title: Partner | Signature: | | | |
| | authorization surface pit permit # has been | | | |
| Acknowledgment of Transfer: The above request for transfer of injection | ration Commission. This acknowledgment of transfer pertains to Kansas | | | |
| Corporation Commission records only and does not convey any ownership | | | | |
| Corporation Commission records only and does not convey any ownership | , interest in the above injection man(e) or purposess | | | |
| is acknowleged as the | is acknowleged as the | | | |
| new operator and may continue to inject fluids as authorized by | new operator of the above named lease containing the surface pit | | | |
| Permit No.: Recommended action: | permitted by No.: | | | |
| | | | | |
| Date: | Date: | | | |
| Authorized Signature | Authorized Signature | | | |
| District | PRODUCTION SITURD UIC 2-//-/ District | | | |
| Mail to: Past Operator New Operator | DIQUICE | | | |

Side Two

Must Be Filed For All Wells

| KDOR Lease | e No.: | | | | |
|------------|------------------------------|--------------------------------------|------------------------|-----------------------------------|--|
| Lease Name | Miller | | * Location: | | |
| Well No. | API No. (YR DRLD/PRE '67) | Footage from S (i.e. FSL = Feet f | | Type of Well (Oil/Gas/INJ/WSW) | Well Status (PROD/TA'D/Abandoned) |
| 1 | 15-08310248-00-01 | Circle FSLFNL | Circle 1480 FED FWL | OIL | Prod |
| 2 | 15-08310249-00-01/ | FSL/FNL | | 0.T.L | _ |
| | | | • | | |
| 3 | 15-083-10250-00-02 | 1980 FSLENL | LOLO FEDFWL | 02 | Prod |
| 4 | 15-083-10251-00-02 | , | | (0.I.L | |
| | | _ | | | • |
| | | FSL/FNL | FEL/FWL _ | | |
| | APPORT | FSL/FNL | FEL/FWL _ | | |
| | | FSL/FNL | FEL/FWL _ | | contain and a second a second and a second a second and a second a second and a second a second and a second a second a se |
| | | FSL/FNL | FEL/FWL _ | | |
| | | FSL/FNL | FEL/FWL _ | | RECEIVEL |
| | | FSL/FNL | FEL/FWL | | |
| | | FSL/FNL | FEL/FWL _ | | KCC WICHI |
| | | FSL/FNL | FEL/FWL _ | | |
| | | FSL/FNL | FEL/FWL | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | FSL/FNL | | | |

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.