# 123109\_Albers\_A\_1\_26pdi

# 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:  |  |  |  |  |
|--|--|--|--|--|
| Oil Lease: No. of Oil Wells**  | Effective Date of Transfer: December 31, 2009                              |  |  |  |
| Gas Lease: No. of Gas Wells  | KS Dept of Revenue Lease No: 139186  |  |  |  |
| Gas Gathering System:  | Lease Name: ALBERS "A" #1-26   |  |  |  |
| Saltwater Disposal Well - Permit No.:  | 60'S of  |  |  |  |
| Spot Location: feet from N / S Line  | N2 - N2 - SE Sec. 26 Twp. 5s R. 29EXW                                      |  |  |  |
| feet from E / W Line   | Legal Description of Lease: E/2 of Section 26-5s-29w                       |  |  |  |
| Enhanced Recovery Project Permit No.:  |  |  |  |  |
| Entire Project: Yes No   | County:  |  |  |  |
| Number of Injection Wells  | Production Zone(s):LKC   |  |  |  |
| Field Name: Wildcat  | Injection Zone(s): NA  |  |  |  |
|  | 11]000011 2010(0)  |  |  |  |
| 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. 5003 /   | Contact Person: Scott Hampel   |  |  |  |
| Past Operator's Name & Address: McCoy Petroleum Corporation                        | Phone: 316-636-2737  |  |  |  |
| 8080 E. Central Ave, Suite #300, Wichita, KS 67206-2366                            | Date: 12/16/09   |  |  |  |
| Title: Vice President - Production   | Signature: Scott Hampe   |  |  |  |
| 30606 /  | Contact Person: Leon Rodak David Doyel                                     |  |  |  |
| New Operator's License No.  New Operator's Name & Address: Murfin Drilling Company | Phone: 316-267-3241 RECEIVED   |  |  |  |
|  | Oil / Gas Purchaser: MV Punchasing DEC 23 20                               |  |  |  |
| 250 N. Waters Street, Suite #300, Wichita, KS 67202                                |  |  |  |  |
|  | Date: 12/18/09 KCC WICH  |  |  |  |
| Title Vice President - Production  | Signature:   |  |  |  |
|  | 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   | is acknowledged as   |  |  |  |
| the new operator and may continue to inject fluids as authorized by                | the new operator of the above named lease containing the surface pit       |  |  |  |
| Permit No.: Recommended action:  | permitted by No.:  |  |  |  |
| Date:  | Date:  |  |  |  |
| Date: Authorized Signature   | Authorized Signature   |  |  |  |
| DISTRICT EPR/-26-/O  | PRODUCTION //27/10 UIC /-26-10   |  |  |  |
| Mail to: Past Operator New Operator  | District   |  |  |  |

### Side Two

### Must Be Filed For All Wells

| KDOR Lease    | No.:                         | 139186 |   | na n |                           |  |                                      |  |
|---------------|------------------------------|--------|---|--|---------------------------|--|--------------------------------------|--|
| * Lease Name: | ALBERS "A" #1-26             |        |   | * L                                      | .ocation: E               | E/2 of Sec 26-5s-29w, Decatur County, KS   |                                      |  |
| Well No.      | API No.<br>(YR DRLD/PRE '67) |        | Footage from Sectio<br>(i.e. FSL = Feet from Sc |  |                           | Type of Well<br>(Oil/Gas/INJ/WSW)  | Well Status<br>(PROD/TA'd/Abandoned) |  |
|               | 15-039-21054-0000            | 2250'  | <i>Check</i><br>⊠FSL □FNL                       | 1320                                     | <i>Check</i><br>⊠FEL □FWL | Oil  | Producing                            |  |
|               |                              | [      | □fsl □fnl .                                     |  |                           |  |                                      |  |
|               |                              |        | □fsl □fnl .                                     | <del>,</del>                             |                           |  |                                      |  |
|               |                              | [      | □fsl □fnl .                                     |  |                           | 4.004.00   |                                      |  |
|               |                              | [      | □fsl □fnl .                                     |  | □fel □fwl                 |  |                                      |  |
|               |                              |        | □fsl □fnl .                                     |  |                           |  |                                      |  |
|               |                              |        | □fsl □fnl .                                     |  |                           |  |                                      |  |
|               |                              |        |   |  |                           | -  |                                      |  |
|               |                              |        | □fsl □fnl .                                     |  |                           |  |                                      |  |
|               |                              |        | □fsl □fnl .                                     |  | □FEL □FWL                 | WARRING TO THE TOTAL THE TOTAL TO THE TOTAL  |                                      |  |
|               |                              |        | □fsl □fnl .                                     |  | □fel □fwl                 |  |                                      |  |
|               |                              |        | □fsl □fnl .                                     |  | □fel □fwl                 | The second secon |                                      |  |
|               |                              |        | □fsl □fnl .                                     |  |                           |  |                                      |  |
|               |                              |        | □fsl □fnl .                                     |  |                           |  |                                      |  |
|               |                              |        | □fsl □fnl .                                     |  | □fel □fwl                 |  |                                      |  |
|               |                              |        | □fsl □fnl .                                     |  |                           |  |                                      |  |
|               |                              |        |   |  |                           |  | RECEIVED                             |  |
|               |                              |        |   |  |                           |  | DEC 2 3 2009                         |  |
|               |                              |        |   |  |                           |  |                                      |  |
|               |                              |        |   |  |                           |  |                                      |  |
|               |                              |        |   |  |                           |  |                                      |  |
|               |                              |        |   |  | _                         |  |                                      |  |
|               |                              |        |   |  |                           | •  |                                      |  |
|               |                              |        |   |  |                           |  |                                      |  |
|               |                              |        | IJFSL LIJFNL .                                  |  | LIFEL LIFWL               |  |                                      |  |

A separate sheet may be attached if necessary

<sup>\*</sup> 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.