

**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 1 \*\*
- ☐ Gas Lease: No. of Gas Wells \_\_\_\_\_ \*\*
- ☐ 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 JOLLY NW

Effective Date of Transfer: 10/22/2009

KS Dept of Revenue Lease No.: 127251

Lease Name: Irvin A Lease

Sec: 33 Twp: 16 R: 21 ☐ E ☒ W

Legal Description of Lease: NW NW

County: Ness

Production Zone(s): CHEROKEE

Injection Zone(s): \_\_\_\_\_

Surface Pit Permit No. \_\_\_\_\_

API No. if Drill Pit, WO or Haul \_\_\_\_\_

\_\_\_\_\_ feet from ☐ N / ☐ S Line of Section

\_\_\_\_\_ feet from ☐ E / ☐ W Line of Section

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☒ Drilling *OR*

Past Operator's License No. 5363 /

Contact Person: Emma Richmond

Past Operator's Name and Address: BEREXCO Inc.

Phone: 316-265-3311

PO Box 20380 Wichita, KS 67208

Date: 01/20/2010

Title: Production Manager

Signature: *Emma Richmond*

New Operator's License Number: 34318 /

Contact Person: Emma Richmond

New Operator's Name and Address: Berexco LLC

Phone: 316-265-3311

P.O. Box 20380 Wichita, KS 67208

Oil / Gas Purchaser: Central Crude Corporation

Date: 01/20/2010

Title: Production Manager

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.: \_\_\_\_\_

Date: \_\_\_\_\_

Authorized Signature

DISTRICT \_\_\_\_\_ EPR 4-22-10 PRODUCTION 4/23/10 UIC 4-22-10  
Mail to: Past Operator \_\_\_\_\_ New Operator \_\_\_\_\_ District \_\_\_\_\_

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

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FEB 23 2010  
KCC WICHITA

102209\_IRVIN\_A.pdf

**Must Be Filed For All Wells**KDOR Lease No.: 127251

*Lease Name: <u>Irvin A Lease</u>		*Location: <u>NW NW</u>		<u>33 - 16 - 21 W</u>	
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)
<u>1</u>	<u>15135230770000 ✓ SE NW NW</u>	<u>4290 ✓</u>	<u>FSL</u>	<u>4290 ✓</u>	<u>FEL</u>
				<u>OIL</u>	<u>PROD</u>

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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.