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 O 1 **	Effective Date of Transfer: January 1, 2010			
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 108935			
Gas Gathering System:	Lease Name: James Operating Unit SW _ Sw _ Sec. 16 Twp. 30 R. 33 E V W			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease: SW/4 SEC 16 30S 33W			
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County: Haskell			
Number of Injection Wells**	Production Zone(s): Lansing			
Field Name: VICTORY				
** Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.: 15081200990000				
(API No. if Drill Pit, WO or Haul)	710 feet from E / V W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover ✓ Drilling			
Past Operator's License No. 32309/	Contact Person: Susan Sears			
Past Operator's Name & Address: Presco Western LLC	Phone: 303-444-8881			
5665 Flatiron PKWY, Boulder, Colorado 80301	Date: January 1, 2010			
Title: Kansas and Colorado Engineering Manager	Signature: Susan Slatt			
New Operator's License No. 5447 J	Contact Person: Brent G. Sonnier			
New Operator's Name & Address: OXY USA Inc.	Contact Person: Brent G. Sonnier RECEIVED Phone: 713-215-7000			
5 E Greenway PLZ, Suite 110, Houston, TX, 77046	Oil / Gas Purchaser: MAR 0 4 201			
Title: Senior Regulatory Advisor	Signature: Sun Signat			
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corpo Corporation Commission records only and does not convey any ownerships.	oration Commission. This acknowledgment of transfer pertains to Kansas			
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 EPR 63/10	PRODUCTION 6/22/10 UIC 6-21-10			
Mail to: Past Operator New Operator	District ————			

Side Two

Must Be Filed For All Wells

* Lease Name:	James Operating Unit	* Location: SW/4 SEC 16 30S 33W			
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)
A-5	15081200990000/	710 Circle	710 Circle	Oil	Prod
		FSL/FNL	FEL/FW	L	
		FSL/FNL	FEL/FW	L	
		FSL/FNL	FEL/FW	L	· -
		FSL/FNL	FEL/FW	L	
		FSL/FNL	FEL/FW	L	
		FSL/FNL	FEL/FW	L	
		FSL/FNL	FEL/FW	L	
		FSL/FNL	FEL/FW	L	
		FSL/FNL	FEL/FW	L	
		FSL/FNL	FEL/FW	L	
		FSL/FNL	FEL/FW	L	
		FSL/FNL	FEL/FW	L	
			FEL/FW		
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					RECEIVED
				L	MAR 0 4 2010
		FSL/FNL		<u> </u>	KCC WICHITA
		FSI /FNI	FEL/FW	1	-

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.