

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: 4290 feet from ☒ N / ☐ S Line
3630 feet from ☐ E / ☒ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: Red Line

**** Side Two Must Be Completed.**

Effective Date of Transfer: 4-1-10

KS Dept of Revenue Lease No.: 114441 *VMB*

Lease Name: Loyd

SW NE NW Sec. 33 Twp. 9 R. 22 ☐ E ☒ W

Legal Description of Lease: NW/4

County: Graham

Production Zone(s): Arbuckle

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 *OK*

Past Operator's License No. 5430 /

Contact Person: Dean Miller

Past Operator's Name & Address: Energy Three Inc.
1437 Old Square Road Suite 201-A Jackson, MS 39211

Phone: 601-713-4122

Title: President

Date: 3/15/10
Signature: *[Signature]*

New Operator's License No. 9292 /

Contact Person: Tim Scheck

New Operator's Name & Address: Scheck Oil Operation
211 S. Front

Phone: 785-483-1292

Russell, KS 67665

Oil / Gas Purchaser: NCRA

Title: President

Date: 4-1-10
Signature: *[Signature]*

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit 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: _____

_____ is acknowledged as the
new operator of the above named lease containing the surface pit
permitted by No.: _____.
Date: _____

Authorized Signature

Authorized Signature

DISTRICT _____ EPR 7-14-10 PRODUCTION 7/15/10 UIC 7-15-10
Mail to: Past Operator _____ New Operator _____ District _____

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

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* Lease Name: Loyd

* Location: **Graham County**

33-9-22W

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.

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