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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

JUL 2 9 2010

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April 2004

KCC WICHITA

REQUEST FOR CHANGE OF OPERATORICE WICH Trorm must be Signed TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Check Applicable Boxes:			
✓ Oil Lease: No. of Oil Wells**	Effective Date of Transfer: February 16, 2010		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 134275		
Gas Gathering System:	Lease Name: Thorpe 2		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	SE - NE - SW - Sec. 24 Twp. 28 R. 16 EV W		
feet from E / W Line	Legal Description of Lease: SE/4, NE/4, SW/4		
Enhanced Recovery Project Permit No.:	Section 24, Township 28S, Range 16W		
Entire Project: Yes No	County:Kiowa		
Number of Injection Wells**			
Field Name:	Production Zone(s): Mississippian		
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	feet from N/S Line of Section feet from E/W Line of Section Haul-Off Workover Drilling		
Past Operator's License No. 30481	Contact Person: Jim Byers		
Past Operator's Name & Address: Apollo Energies, Inc.	Phone:		
10378 North 281 Hwy Pratt, KS 67124	MAN 25 7010		
Title: President	Date: 25, 2010		
Title: _FTesiderit	Signature:		
New Operator's License No. 5893 /	Contact Person: Kenneth C. Gates		
New Operator's Name & Address: Pratt Well Service, Inc.	Phone: 620-672-9571 ext 5		
PO Box 907			
Drott VC 67424	Oil / Gas Purchaser:		
Pratt, KS 67124	Date: May 25, 3010		
Title: President	Signature: Klimbly College		
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 Corpor	ration Commission. This acknowledgment of transfer pertains to Kansas		
Corporation Commission records only and does not convey any ownership			
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 8-6-10 F Mail to: Past Operator New Operator	PRODUCTION 8/16/10 UIC AUG 9 2010		
Mell to: KCC Conservative Division 1000 C	District		

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

Side Two

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Must Be Filed For All Wells

KCC WICHITA

KDOR Lease	No.: 134275				KCC WICHITA
* Lease Name			* Location: S	ection 24 T28S, R16W	
Well No. API No. (YR DRLD/PRE '67)		Footage from (i.e. FSL = Feet	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)
2	15-097-21292 🗸	1160 FSL/FAL	330 FZ Circle	Oil	TA'D
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	-				
		FSL/FNL			
		FSL/FNL			
		FOL/FNL	FEL/FWL		

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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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1 July 2010 Form Must Be Typed Form must be Signed All blanks must be Filled

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).

Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: C-1 (Intent) CB-1 (C	athodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 3048/ Name: Apollo Energies, Inc. Address 1: 10378 N. 281 Hay Address 2:	Well Location: SE-NE-SU Sec. 24 Twp. 28 S. R. 16 ☐ East West County: Kowa Lease Name: Thorpe Well #: 2 If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Surface Owner Information: Name: Victor A ' Kathy Hannan Address 1: 14202 59th Ayc Address 2: City: Haviland State: K3 Zip: 67059+	When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathod the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:	batteries, pipelines, and electrical lines. The locations shown on the plat
I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be loc CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, an	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this
☐ I have not provided this information to the surface owner(s). I acknowledge that I am being charged a \$30.00 handling f	ner(s). To mitigate the additional cost of the KCC performing this
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	e with this form. If the fee is not received with this form, the KSONA-1 will be returned.
I hereby certify that the statements made herein are true and correct to t	he best of my knowledge and belief.
Date: 7-28-10 Signature of Operator or Agent:	Title: Knoduction Tech