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:	1 0,00000		
✓ Oil Lease: No. of Oil Wells 2 **	Effective Date of Transfer: 04012010		
Gas Lease: No. of Gas Wells***	KS Dept of Revenue Lease No.: 106417 V		
Gas Gathering System:	Lease Name: Evans C		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease: NW4		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: Kingman		
Number of Injection Wells**	Production Zone(s): Mississippi		
Field Name: Spivey-Grabs-Basil			
** Side Two Must Be Completed.	Injection Zone(s):		
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. 32825/	Contact Person: John Houghton		
Past Operator's Name & Address: Pioneer Exploration, LLC	Phone: 281-893-9400		
15603 Kuykendahl, Ste 200, Houston, TX 77090	Date: 04/01/2010		
	Jae M		
Title: Engineer	Signature: AMA I		
New Operator's License No. 34357	Contact Person: John Houghton		
New Operator's Name & Address: Atlas Operating LLC	Phone: 281-893-9400		
15603 Kuykendahl, Ste 200, Houston, TX 77090	Oil / Gas Purchaser: NCRA/KGS,		
	Date: 04/01/2010		
Title: Engineer	Signature:		
Acknowledgment of Transfer: The above request for transfer of injection	no authorization surface nit nermit # has been		
	poration Commission. This acknowledgment of transfer pertains to Kansas		
Corporation Commission records only and does not convey any owners	inp interest in the above injection west(s) or pic permit.		
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:RECEIVED		
Authorized Signature	Authorizan CORPORATION COMMIS		
DISTRICT EPR \$-27-10	PRODUCTION \$\\\30\\\10\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
Mail to: Past Operator New Operator			



Side Two

Must Be Filed For All Wells

KDOR Leas	e No.: 106417				
* Lease Name: Evans C		* Location:			
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)
2	15-095-00614	4290 FSL FSL/FNL	2970 FEL FEL/FWL	Oil	Prod
3	15-095-01131 /	4290 FSL FSL/FNL	4290 FEL FEL/FWL	Oil	TA'd
		F\$L/FNL	FEL/FWL		
	Vie s.	FSL/FNL	FEL/FWL		
	-	F\$L/FNL	FEL/FWL		
•		F\$L/FNL	FEL/FWL		
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		FSL/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.