KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form I-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:	ı		
✓ Oil Lease: No. of Oil Wells**	Effective Date of Transfer: June 1, 2010		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 114843		
Gas Gathering System:	Lease Name: GRACE WALN 11/6		
Saltwater Disposal Well - Permit No.:	Lease (Vallie,		
Spot Location: feet from [] N / [] S Line			
feet from E / W Line	Legal Description of Lease: E/2 NW/4		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: McPHERSON		
Number of Injection Wells**	Production Zone(s): Mississippian		
Field Name: Ritz-Canton			
** 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. 6557 ./	Contact Person: William Marston		
Past Operator's Name & Address: Hawkeye Oil	Phone: 620-628-4387		
11 Park Ct., Hillsboro, KS 67063-1917	Date: _June 16, 2010		
Title: Owner/Operator			
Title: Owner/Operator	Signature: Maslys G. Marston		
New Operator's License No. 5399 /	Contact Person: Alan L. DeGood		
New Operator's Name & Address: American Energies Corporation	Phone: 316-263-5785		
155 N. Market, Suite 710, Wichita, KS 67202	Oil / Gas Purchaser: NCRA RECEIVED KANSAS CORPORATION COMMISSION		
	5 June 16 2010 6 / 1		
Title: President	Olan Lackson 30 2010		
Title: Tresident	POLICE DIVISION DIVISION		
	MICHINI		
Acknowledgment of Transfer: The above request for transfer of injection and the second			
noted, approved and duly recorded in the records of the Kansas Corpora	•		
Corporation Commission records only and does not convey any ownership	interest in the above injection well(s) or pit 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:		
Authorized Signature	Authorized Signature		
	PRODUCTION 1/23/10 UIC 7-22-10		
Mail to: Past Operator New Operator	District		

SCANNED

Side Two

Must Be Filed For All Wells

* Lease Name	GRACE WALN		* Location: SV	VNENW Secl	-205-14
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)
1	15-113- 20771	4290 Circle	3630 Circle	OIL	PROD
		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	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		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.