## 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

✓ Oil Lease: No. of Oil Wells 1   Gas Lease: No. of Gas Wells **   Gas Gathering System: KS Dept of Revenue Lease No.: 120628   Saltwater Disposal Well - Permit No.: Lease Name: waiters   Spot Location: feet from N/ S Line   Feet from E / W Line Legal Description of Lease: tract in sw 1/4   Entire Project: Yes No    County: Coffey	<b>∕</b> E□W			
Gas Gathering System:  Saltwater Disposal Well - Permit No.:  Spot Location:  feet from   R /   S Line  feet from   E /   W Line  Enhanced Recovery Project Permit No.:  Entire Project:   Yes   No   No   No   No   No   No   No   N	<b>/</b> EW			
Gas Gathering System:  Saltwater Disposal Well - Permit No.:  Spot Location:  feet from N / S Line  feet from E / W Line  Enhanced Recovery Project Permit No.:  Entire Project: Yes No  Lease Name: walters  County: coffey	<b>√</b> E□W			
Saltwater Disposal Well - Permit No.:  Spot Location:  feet from N / S Line  feet from E / W Line  Legal Description of Lease: tract in sw 1/4  Legal Description of Lease: tract in sw 1/4  County:  County:	<b>_</b> W			
Spot Location: feet from N / S Line feet from E / W Line Legal Description of Lease: tract in sw 1/4 Enhanced Recovery Project Permit No.:	VEW			
Enhanced Recovery Project Permit No.:  Entire Project: Yes No County:				
Entire Project: Yes No County: coffey				
Entire Project: Yes No County: coffey				
Number of Injection Wells**  Production Zone(s): squirrel	Production Zone(s): Squirrel			
Field Name: leroy	}			
** Side Two Must Be Completed.				
Surface Pit Permit No.: feet from N / S Line of Sect				
Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling	uon			
	<del></del>			
Past Operator's License No. 4997 6752 Exp. 6/30/86 Contact Person: LOWELL H GRAHAM				
Past Operator's Name & Address: LOWELL H GRAHAM Phone: 620 964 2569	Phone: 620 964 2569			
240 VERDURE RD SE LEROY KS 66857  Date: 6-15-10				
l u a a				
Title: OPERATOR Signature: Joull 41, 20 Mpp	Signature: Study W/ WMMM			
New Operator's License No. 31488 / Contact Person: MARK GEORGE				
New Operator's Name & Address: MARK GEORGE Phone: 620 363 0250				
PAZ C STREET LEBOV VC 99957 RECEIVED				
KANSAS CORPORATION COMMISSION				
JUN 16 2010 Date: 6 - 13 - 10				
Title: OPERATOR Signature: Signature:				
CONSERVATION DIVISION WICHITA, KS				
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 perta	ins to Kansas			
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	owleded as the			
new operator and may continue to inject fluids as authorized by new operator of the above named lease containing the				
	ne suriace pit			
Permit No.: Recommended action: permitted by No.:				
Date: Date: Authorized Signature Authorized Signature	ure			
9/2///2 9/2///2 921 1/	1			
DISTRICT	<b>—</b> ————			

Side Two

SCANNED

## Must Be Filed For All Wells

KDOR Lease	No.: 120628		Fr. MAIN DA		
Lease Name		* Location:	5W 34-2	22-16E	
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	15-031-21405 /	180 Circle	702 Circle	oil	prod
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	<del> </del>	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		<u> </u>
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
Ки	RECEIVED NSAS CORPORATION COMMISSION	FSL/FNL	FEL/FWL	Mart	
	- JUN 1 6 2010	FSL/FNL	FEL/FWL		
	CONSERVATION DIVISION WICHITA, KS	FSL/FNL	FEL/FWL		
	WICHITA NO	FSL/FNL	FEL/FWL		***************************************
		FSL/FNL	FEL/FWL		
	***************************************	FSL/FNL	FEL/FWL		
		FSI /FNI	FEL/FWI		

## A separate sheet may be attached if necessary

<sup>\*</sup> 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.