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
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: October 8, 2007
✓ Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: 2/9/20
Gas Gathering System:	Lease Name: Helm#1
Saltwater Disposal Well - Permit No.:	05 05 05
Spot Location: feet from N / S Line	SE_SE_NE_ Sec. 23 Twp. 19 R. 40 E/W
feet from E / W Line	Legal Description of Lease: NE/4 of Sec 23, Twp 19S, Range 40, West of the 6th
Enhanced Recovery Project Permit No.:	Principal Meridian in Greeley County, Kansas, containing 160 acres, more or less.
Entire Project: Yes No	County: Greeley
Number of Injection Wells**	Production Zone(s): Chase
Field Name: Bradshaw	
** 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. 8076 Exp 1/30/07	Contact Person: Ronda Maxwell
Past Operator's Name & Address: Gamma Resources, Inc.	Phone: 620-624-6405
P O Box 800, Liberal, Kansas 67905-0800	Date:March 17, 2010
Title: Vice-President	Signature: Muywell
New Operator's License No. 34029 /	Contact Person: Ronda Maxwell RECEIVED
New Operator's Name & Address: Gamma Resources, Inc.	Phone: 620-624-6405
P O Box 800, Liberal, Kansas 67905-0800	Oil / Gas Purchaser:
	Date: March 17, 2010 KCC WICHITA
Title: Vice-President	Signature: Mufwell
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corpor Corporation Commission records only and does not convey any ownership	ration Commission. This acknowledgment of transfer pertains to Kansas
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
Authorized Signature	

Must Be Filed For All Wells

KDOR Lease	e No.:				•
* Lease Name	: Helm #1		* Location: S	ESENE 23 19S 40 W G	reeley County, KS
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	15-071-20612-00-00	2970 FSDFNL	340 Circle	Gas	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		
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		FSL/FNL	FEL/FWL	-	APR 0 7 2010
			FEL/FWL		KCC WICHITA
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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.