

**KANSAS CORPORATION COMMISSION
OIL GAS CONSERVATION DIVISION
REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION OR SURFACE PIT PERMIT**

Form T-1

April 2004

**Form must be Typed
Form must be Signed
All blanks must be filled**

Check Applicable Boxes:

- ☒ Oil Lease: No. of Oil Wells 1 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☒ S Line
_____ feet from ☐ E Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells:: _____ **
- Field Name US 83

****Side Two Must Be Completed.**

Effective Date of Transfer: 10/22/09

KS Dept of Revenue Lease No.: 128616 218673

Lease Name: Laverne 4-18

Sec: 18 Twp: 29 R: 32 ☐ E ☒ W

Legal Description of Lease: SE/4 SW/4

County: Haskell

Production Zone(s): CHESTER

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. 5363 ✓

Past Operator's Name and Address: BEREXCO Inc.

PO Box 20380 Wichita, KS 67208

Title: Production Manager

Contact Person: Emma Richmond

Phone: 316-265-3311

Date: 12/04/2009

Signature: Emma Richmond

New Operator's License Number: 34318 ✓

New Operator's Name and Address: Berexco LLC

P.O. Box 20380 Wichita, KS 67208

Title: Production Manager

Contact Person: Emma Richmond

Phone: 316-265-3311

Oil / Gas Purchaser: Central Crude Corporation / Reducing Gas

Date: 12/04/2009

Signature: Emma Richmond

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

_____ is acknowledged as the
new operator and may continue to inject fluids as authorized by
Permit No.: _____. Recommended action: _____

Date: _____
Authorized Signature

_____ is acknowledged as the
new operator of the above named lease containing the surface pit
permitted by No.: _____

Date: _____
Authorized Signature

DISTRICT _____ EPR 10-19-10 PRODUCTION 10/20/10 UIC 10-19-10
Mail to: Past Operator _____ New Operator _____ District _____

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

**RECEIVED
KANSAS CORPORATION COMMISSION**

FEB 08 2010

**CONSERVATION DIVISION
WICHITA, KS**

**RECEIVED
DEC 08 2009
KCC WICHITA**

102209_Laverne_4_18.pdf

Must Be Filed For All Wells

KDOR Lease No.: 128616 216873

*Lease Name: Laverne 4-18		*Location: SE/4 SW/4		18 - 29 - 32 W	
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)
4	15081204920000 <i>SE SW</i>	660 ✓ FSL	3300 ✓ FEL	OIL	TA

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FEB 08 2010

CONSERVATION DIVISION
WICHITA, KS

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KCC WICHITA

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.