Form T-1

March 2010

REQUEST FOR CHANGE OF OPERATION WICHIT All blanks must be Filled
TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,

Check Applicable Boxes: MUST be submit	itted with this form.		
✓ Oil Lease: No. of Oil Wells**	Effective Date of Transfer: April 15, 2004		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 121439		
Gas Gathering System:	Lease Name: Woydziak		
Saltwater Disposal Well - Permit No.:			
Spot Location: W2SESW feet from N / S Line	Sec. 29 Twp. 16S R. 13 E V W		
feet from E / W Line	Legal Description of Lease: SW/4, Sec 29,Twp16S, R13W		
Enhanced Recovery Project Permit No.:	Barton Co., Kansas containing 160 acres more or less		
Entire Project: Yes No	County: Barton		
Number of Injection Wells **	Production Zone(s): unknown		
Field Name: Trapp	Injection Zone(s): unknown		
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.: Applied for 4/27/04 (API No. if Drill Pit, WO of 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. 32571 / Exp 1/34 0 2	Contact Person: Dan Ryan		
Past Operator's Name & Address: Daniel J. Ryan	Phone: 405-631-6300		
6300 S Western Oklahoma City, OK 73139	Date:		
Title: operator	Signature: Dan Ryon		
New Operator's License No. 33403	Contact Person: Tina Watson		
New Operator's Name & Address:Tina A Watson	Phone: 4057938701		
300 SW 93rd St.	Oil / Gas Purchaser: Semcrude		
Oklahoma City, OK 73139	Date:		
Title: Owner / Operator	Signature: Scu Water		
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
is acknowledged as	is acknowledged as		
the new operator and may continue to inject fluids as authorized by	the new operator of the above named lease containing the surface pit		
Permit No.: Recommended action:	permitted by No.:		
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR // 9/10	PRODUCTION 11-10-10 UIC 11-10-10		
Mail to: Past Operator New Operato	or District		

Side Two

Must Be Filed For All Wells

* Lease Name:	Woydziak	* Location: sec.29,twp.16S,r13W,				
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	15-009-234040000 /	330 Circle	2285 Circle	OIL	PROD	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		<u> </u>	
		FSL/FNL	FEL/FWL	RECE	IVE D	
		FSL/FNL	FEL/FWL	IUL_2	9 2010	
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		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.