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

AUG 10 2009

REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Check Applicable Boxes:
Solit Lease: No. of Oil Wells Saltwater Disposal Well - Permit No.: D-27, 492
Gas Gathering System: Saltwater Disposal Well - Permit No.:
Gas Gathering System: Saltwater Disposal Well - Permit No.:
Saliwater Disposal Well - Permit No.:
Spot Location: Teet from N S Line feet from E / W Line Legal Description of Lease: SW/4 (160acres)
Enhanced Recovery Project: Permit No.: Entire Project: Yes No Number of Injection Wells "Side Two Must Be Completed. Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) (API No. if Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling Past Operator's License No. 32753 Past Operator's Name & Address: P. Q. Box 771189 Wichita, KS 67277 SEED Group Title: Geologist New Operator's Name & Address: ALTEX Operating P.O. Box 12605; Wichita, KS 67277 Outline Country: Summer Production Zone(s): Cleveland, KC Injection Zone(s): Cleveland, KC Injection Zone(s): Cleveland, KC Injection Zone(s): Cleveland, KC Injection Zone(s): Summer Production Zone(s): Cleveland, KC Injection Zone(s): Cleveland, K
Entire Project: Yes No Number of Injection Wells Field Name: Production Zone(s): Cleveland, KC Injection Zone(s):
Number of Injection Wells
Production Zone(s): cleveland, KC Field Name: Side Two Must Be Completed.
Field Name: Surface Pit Permit No.:
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling Past Operator's License No. Title: Geologist New Operator's License No. 34277 Contact Person: Contact Person: Signature: Contact Person: Contact Person
Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling Past Operator's License No. 32753 Past Operator's Name & Address: P. Q. Box 771189 Wichita, KS 67277 SEED Group Title: Geologist New Operator's License No. 34277 New Operator's Name & Address: ALTEX Operating P. Q. Box 12605; Wichita, KS 67277 Paul Carageannis Contact Person: Paul Carageannis Phone: 316-807-1209 Date: 8/7/199 Signature: Charles F. Thomas Phone: 316-807-0692 Phone: 316-807-0692 Phone: 316-807-0692 Oil / Gas Purchaser: Central Kansas Crude
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P.O. Box 12605; Wichita, KS 67277 ON / Gas Purchaser: Central Kansas Crude
P.O. Box 12605; Wichita, KS 67277 ON / Gas Purchaser: Central Kansas Crude
Date. Ground
THE OWNER TO SEE THE
Title: OWNET Signature: Signature:
Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # has be
noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kans
Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.
Altex Operating is acknowleded as the is acknowledged as the
new operator and may continue to inject fluids as authorized by new operator of the above named lease containing the surface
Permit No. D - 27,492. Recommended action: U3C permitted by No.:
Violation 2004-08
Date: 8-19-09 Barbara V Intomerk Date:
DISTRICT EPR 8/19/09 PRODUCTION UIC 8-19-09
DISTRICT PRODUCTION UIC 8-19-09 Mail to: Past Operator 9-19-09 New Operator 9-19-09 District 8-19-09 7

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

Must Be Filed For All Wells

KDOR Lease	No.:				
* Lease Name:	CULLY		* Location:	34/4 (160 Ac	cres)
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)
Z-20	15-191-21114"	3630 Circle FSLIFNL 29	Circle 70 FEUFWL .	Suda	ins
4-20	15-191-21150V	1650 (FSUFNL 33)	FELFWL)	014	TA
5-20	15-191-21161	2310 FSWFNL 99	FELFWL .	OIL	
6-20	15-191-211961	330 FSUFNL 23	O FELFWL)	616	PROD.
7-20	15-191-22471	330 (FSLIFNL 106	D FELFWL	OIL	PRED
		FSL/FNL	FEL/FWL _		0
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL _		, egt.
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL _		. 8
		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.