RECEIVED #2

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:			
Oil Lease: No. of Oil Wells*	Effective Date of Transfer: 10 -15 -1999		
Gas Lease: No. of Gas Wells+	KS Dept of Revenue Lease No.: 20/80		
Gas Gathering System:	Lease Name: /- Lant SWI)		
✓ Saltwater Disposal Well - Permit No.: D 20/80			
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease: WW/4 SetTien/6.		
Enhanced Recovery Project Permit No.:	TWP 34 S. R. / E		
Entire Project: Yes No	County: Summer		
Number of Injection Wells**	Production Zone(s):		
Field Name: Sumner tield	Injection Zone(s): Arbuckle		
** Side Two Must Be Completed.	injection zone(s).		
WA.	feet from N / S Line of Section		
Surface Pit Permit No.: / V / \ (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. 32727	Contact Person: RECEIVED ok to process		
Past Operator's Name & Address: Jeffries Pumping Servi	CR Atons. JUL 2 8 2004 Rev Alan Sny der		
12501 S. 44 Street	Date:		
Title: Tonkawa Ok 74653	Signature: KCC WICHITA		
Title.	Please See attached		
New Operator's License No. 3 3 99 3 3 3 5 5 3	Contact Person: Des Blackbyrn		
New Operator's Name & Address: Style UTL 2nc	Phone: 580 - 267 - 3289		
RR Box ///			
Wordin. OK 74646	7-11 -04		
	Date.		
Title: prestdint	Signature: Dee Blackbirm		
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			
Corporation Commission records only and does not convey any ownership	interest in the above injection wen(s) of pit permit.		
Sake Oil, Inc is acknowledged 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.: D-20, 180 . Recommended action:	permitted by No.:		
None			
Date: 12-12-06 Barbara / Junion	Date:		
Authorized Sighature	Authorized Signature		
Mail to: Past Operator 12-13-06 New Operator 12-1	PRODUCTION UIC 12-13-06 13-06 District 2 12-13-06		
Iviali to. Tast Operator Programme Thew Operator Programme Transfer of the Programme Transfer of	District		

Side Two

Must Be Filed For All Wells

* Lease Name	Hunt	SWD	ď	* Location:	Summer Co	inty
Well No.	API No (YR DRLD/PI		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	15-191-190	37-00-01°	Circle FSUFNI	Circle FELIFAND _	2nJ	AI operating
= 1			FSL/FNL	FEL/FWL _		
			FSL/FNL	FEL/FWL _		
			FSL/FNL	FEL/FWL		
		SF 1	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 A A A A A A A A A A A A A A A A A A	FSL/FNL	FEL/FWL _		
			FSL/FNL			
						ē
		72 2				
*						
1						

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.