REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION AUTHORIZATION
OR TRANSFER OF SURFACE POND PERMIT

STATE CORPORATION COMMISSION
CONSERVATION DIVISION
200 COLORADO DERBY BLDG.
WICHITA, KS 67202

15-009-15684-0001

Effective Date of Transfer 12-01-94

Check Applicable Boxes:

Lease Name Polzin "C"

[ ] Oil Lease: No. of Wells _____

4 Sec. T 16 S R 12 (W)/E

[ ] Gas Lease: No. of Wells _____ D-3096

Legal Description of Lease: SW-NE-SE

[XX] Saltwater Disposal Well - Docket No. N/A
Spot Location: 1650 feet from N/(S) Line
990 feet from (E)/W Line

County Barton

[ ] Enhanced Recovery Project Docket No. _____
Entire project: Yes/No
Number of injection wells _____

Production Zone(s) _____

Injection Zone(s) Lower Arbuckle

Field Name _____

Surface Pond Permit # _____

_____ Feet from N/S Line of Section
_____ Feet from E/W Line of Section

Identify: Emergency Pit ☐ Burn Pit ☐ Storage Pit ☐

List API#'s on all post-1967 wells transferred with lease: "C" #3--drilled 1-18-47

Past Operator's License No. 6284

Contact Person: Alan Vonfeldt

Past Operator's Name and Address:
Vonfeldt Oil Operations, Inc.
524 St. John
Russell, Kansas 67665

Phone: (913)-483-6446

Date 1-3-95

Title Operations Manager

Signature Alan Vonfeldt

New Operator's License No. 31560

Contact Person Pat Keating

New Operator's Name and Address
Maxwell Operating Co., Inc.
1675 Broadway, Suite 1050
Denver, CO 80202

Phone (303)-592-1224

Oil/Gas Purchaser Farmland Industries

Date _____

Title President

Signature _____

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

Maxwell Oil Operations Co, Inc, is acknowledged as the new operator and may continue to inject fluids as authorized by Docket # D-3096. Recommended action Please schedule an MIT with District office

Date 2-6-95 Authorized Signature

_____ is acknowledged as the new operator of the above named lease containing the surface pond permitted by # _____.

Date _____ Authorized Signature

Form T1 10/91