

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

KANSAS CORPORATION COMMISSION
CONSERVATION DIVISION
130 S MARKET, ROOM 2078
WICHITA, KANSAS 67202

022699_Hahn.pdf

Check Applicable Boxes:

Effective Date of Transfer 02/26/99

☒ Oil Lease: No. of Wells 15 **

Lease Name Hahn

☐ Gas Lease: No. of Wells _____ **

- - SE- $\frac{1}{4}$ Sec 22 T 18 R 21 W E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: _____

☐ Saltwater Disposal Well - Docket No. _____

S/E $\frac{1}{4}$ of Sec. 22, T 18, 21E of the

Spot Location: _____ feet from N/S Line

6th principal meridian

_____ feet from E/W Line

County franklin

☐ Enhanced Recovery Proj. Docket No. _____

Entire project: Yes/No

Number of injection wells _____ **

Production Zone(s) squirrel

Field Name _____

Injection Zone(s) _____

Surface Pond Permit # _____

(API No. If Drill Pit)

_____ Feet from N/S Line of Section

_____ Feet from E/W Line of Section

Identify: Emergency Pit ☐

Burn Pit ☐

Storage Pit ☐

Drill Pit ☐

Past Operator's License No. 32324 ✓

Contact Person: Douglas G. Evans

Past Operator's Name and Address:

Phone: 785-883-4057

J & D Resources, Inc.

PO Box 128

Wellsville, KS 66092

Date 02-22-99

Title operator

Signature Douglas G. Evans

New Operator's License No. N/A 32440 ✓

Contact Person Ralph L. Keyse

New Operator's Name and Address

Phone 913-755-4300

Ralph L. Keyse

PO Box 581

Osawatomie, KS 66064

Oil/Gas Purchaser N/A

Date 02/26/99

Title operator

Signature Ralph L. Keyse

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.

_____ is acknowledged as the new operator and may continue to inject fluids as authorized by Docket # _____. Recommended action _____

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

Date _____

Authorized Signature

Date _____

Authorized Signature

Form T1 7/94

MUST BE FILED FOR ALL WELLS

22-18-21E

HAHN

*LEASE NAME

32324
3244Q

2/26/99

LCs

*LOCATION: Franklin County

WELL NO.	API NO.	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)	TYPE OF WELL (OIL/GAS INJ/WSW)	WELL STATUS (PROD/TA'D ABANDONED)
2D	N/A 059-01160	N/A	Oil	Prod
3D	N/A 01161	N/A	Oil	prod.
9D	N/A 01162	N/A	Oil	prod.
10D	N/A 01163	2100	Oil	prod.
11D	N/A 01164	N/A	Oil	prod.
12D	N/A 01165	N/A	Oil	prod.
21D	N/A 01174	880	Oil	prod.
22D	N/A 01166	N/A	Oil	prod.
23D	N/A 01167	N/A	Oil	prod.
36D	N/A 01168	N/A	Oil	prod.
14D	N/A 01169	N/A	Oil	prod.
A15D	N/A 01170	N/A	Oil	prod.
B15D	N/A 01171	N/A	Oil	prod.
C10D	N/A 01172	N/A	Oil	prod.
D15D	N/A 01173	N/A	Oil	prod.

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.