REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION AUTHORIZATION OR TRANSFER OF SURFACE POND PERMIT		CONSERVA	ORPORATION COMMISSION ATION DIVISION ARKET, ROOM 2078 KANSAS 67202				
***********	****		196 Dewey pdf				
KDOR: 106130			, - -				
Check Applicable Boxes:		Effective	Date of Transfer 3-1-96				
[X] Oil Lease: No. of Wells 3 **		Lease Name	Dewey				
[] Gas Lease: No. of Wells ** ** SIDE TWO MUST BE COMPLETED **			- Sec 21 T 28S R 5W W/E ription of Lease: Kingman				
[] Saltwater Disposal Well - Docket No Spot Location: feet from N/S	Line	-	21-28S-5W				
feet from E/W [] Enhanced Recovery Proj. Docket No Entire project: Yes/No		County	ingman				
Number of injection wells**		Production	Zone(s) Mississippi				
Pield Name Broadway		Injection	Zone(s)				

Surface Pond Permit # (API No. If Drill Pi		•	Feet from N/S Line of Section Feet from E/W Line of Section				
Identify: Emergency Pit Burn Pit	s	torage Pit	Drill Pit				
*********	*****	*****	*******				
Past Operator's License No. 5783	Contact	Person: _	Jay H. Galloway				
Past Operator's Name and Address:	Phone:	316-2	63-1793				
Galloway Drilling Co., Inc.	Date	3 - 1-9	6 .				
105 S Broadway Suite 340 Wichita, Ks 67202			<i> </i>				
Title President	Signatu	re	of pet				
*************	*****	**** * **					
New Operator's License No. 5086	Contact	Person	Flip Phillips				
New Operator's Name and Address	Phone _	316/263	-2243 Care 1720				
Pintail Petroleum, Ltd.	Oil/Gas	Purchaser	Koch				
225 N. Market, Suite 300 Wichita, KS 67202	Date	3/20/96					
•	_	1 4	t. 1				
Title President	Signatu	re /WW	y Opines (mily				
ACKNOWLEDGEMENT OF TRANSFER: The above surface pond permit # has bee of the Kansas Corporation Commission. The Corporation Commission records only and description well(s) or pond permit.	n noted, is ackno	approved wledgement	and duly recorded in the record: of transfer pertains to Kansa:				
is acknowledged			is acknowledged as the				
as the new operator and may continue to	new ope	rator of t	he above named lease containing				
inject fluids as authorized by Docket #	the sur	face pond	permitted by #				
. Recommended action	1						
Date	Date						
Authorized Signature		<u> </u>	Authorized Signature Form T1 7/54				

MUST BE FILED FOR ALL WELLS

													#3	#2	#	WELL NO.	*LEASE NAME
														- 0/0/04-mx - 1 5 - 6 2	15-095-01067-000 No. 05-01-50 No.	API NO. (YR DRLD/PRE '67) ·	Dewey
			:										NWNE SE	SE NMSC	NW NWSE	FOOTAGE I	*LOCATIO
FSL/FNL	FSL/FNL	Circle FSL/FNL	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South	*LOCATION: U/2 SE & 21.													
FEL/FWL	FEL/FWL	Circle FEL/FWL	E Line)	21-285 500													
													eil \$ 300	ed & 600	sil 8 ga	TYPE OF WELL (OIL/GAS INJ/WSW)	
													prod	prod	prod	WELL STATUS (PROD/TA'D ABANDONED)	

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.