

BEST 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

030199-Phinney.pdf

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Check Applicable Boxes: Effective Date of Transfer 3-1-99

(X) Oil Lease: No. of Wells 5 Lease Name Phinney

[] Gas Lease: No. of Wells 0 - - - N2 Sec 5 T 15 R 14 W/2
** SIDE TWO MUST BE COMPLETED **

(X) Saltwater Disposal Well - Docket No. D25480
Spot Location: 4290 feet from N/S Line
1650 feet from E/W Line
Legal Description of Lease: N/2
Sec 5-15-14 W

[] Enhanced Recovery Proj. Docket No. _____
Entire project: Yes/No _____
Number of injection wells _____
County Russell
Production Zone(s) LUC & ARB

Field Name Hall Injection Zone(s) G-wash

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. 6155 Contact Person: Joe b Rierson

Past Operator's Name and Address: Earco Oil Operations Inc.
612 S Maple
Mepherson Kansas 67460
Phone: 316-241-5183
Date: 3-26-99
Title: President Signature: Joe Rierson

New Operator's License No. 32185 Contact Person: Tim Mahoney

New Operator's Name and Address: J.A.M. Inc
P.O. Box 110
Russell Kansas 67665
Phone: 785-483-5447
Oil/Gas Purchaser: _____
Date: 3/26/1999
Signature: Tim Mahoney

ACKNOWLEDGEMENT OF TRANSFER: The above request for transfer of injection authorization surface pond permit # _____ has been noted, approved and duly recorded in the record 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 _____
Date _____
Authorized Signature _____

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

