

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

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

Check Applicable Boxes:

[X] Oil Lease: No. of Wells 7 **

[] Gas Lease: No. of Wells _____ **
** SIDE TWO MUST BE COMPLETED **

[] Saltwater Disposal Well - Docket No. _____
Spot Location: _____ feet from N/S Line
_____ feet from E/W Line

[X] Enhanced Recovery Proj. Docket No. E-8456
Entire project: (Yes)/No
Number of injection wells 1 **

Field Name GORHAM

Surface Pond Permit # _____
(API No. If Drill Pit)

Identify: Emergency Pit ☐ Burn Pit ☐

Effective Date of Transfer 4-15-99

Lease Name COADY

SW 1/4 sec 16 T 14 R 14 W/R

Legal Description of Lease: _____

SW 1/4 SEC. 16-14-14W

County RUSSELL

Production Zone(s) TARKIO, LKC

Injection Zone(s) LKC

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

Storage Pit ☐ Drill Pit ☐ JK

Past Operator's License No. 5259

Past Operator's Name and Address:

MAI OIL OPERATIONS, INC.

P.O. BOX 33

RUSSELL, KS. 67665 PROD. SUPT.

New Operator's License No. 4058

New Operator's Name and Address

American Warrior, Inc.

PO Box 399

Garden City, Kansas 67846

Title President

Contact Person: ALLEN BANGERT

Phone: 785-483-2169

Date 4-15-99

Signature Allen Bangert

Contact Person Cecil O'Brate

Phone 316/275-9231

Oil/Gas Purchaser NCRA

Date 4-19-99

Signature Cecil O'Brate

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 # _____

RECEIVED

CONSERVATION

Date _____

Authorized Signature _____

APR 20 1999

Authorized Signature _____

Form T1 7/9

CONSERVATION DIVISION
Wichita, Kansas

COADY

API NO.
(YR DRLD/PRE '67).

**TYPE OF WELL
(OIL/GAS
INJ/MSW)**

**WELL STATUS
(PROD/TA'D
ABANDONED)**

[illegible]

A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

*When transferring a unit which consists of more than one lease please file a separate slide two for each lease. If a lease covers more than one section please indicate which section each well is located.