

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

Effective Date of Transfer 5-1-94

Check Applicable Boxes:

Lease Name TIM WAGNER "A"

[X] Oil Lease: No. of Wells _____

4 Sec. T 9 S R 24 W/E

[] Gas Lease: No. of Wells _____

Legal Description of Lease: _____
NW/4

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

County GRAHAM

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

Production Zone(s) _____

Injection Zone(s) _____

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: _____

Past Operator's License No. 03386

Contact Person: RUSS LEAVELL

Past Operator's Name and Address:

Phone: 913-628-3324

LEAVELL RESOURCES CORPORATION

Date 4/27/94

P.O. BOX 308

Signature Russ Leavell

HAYS, KS 67601

Title PRES.

New Operator's License No. 31450

Contact Person RUSS LEAVELL

New Operator's Name and Address

Phone 913-625-4397

PRAIRIE OIL PARTNERS

P.O. BOX 296

HAYS, KS 67601

Title Manager

Signature Russ Leavell

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 _____

Date _____
Authorized Signature _____

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

Date _____
Authorized Signature _____

RECEIVED
MAY 18 1994
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
Wichita, Kansas
Form 11-885