

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

060198\_Anna.pdf  
KANSAS CORPORATION COMMISSION  
CONSERVATION DIVISION  
130 S MARKET, ROOM 2078  
WICHITA, KANSAS 67202

\*\*\*\*\*

Check Applicable Boxes:

[X] Oil Lease: No. of Wells \_\_\_\_\_ \*\*

[X] 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

[ ] Enhanced Recovery Proj. Docket No. \_\_\_\_\_

Entire Project: Yes/No

Number of Injection Wells \_\_\_\_\_ \*\*

Field Name Spivey-Grabs

Surface Pond Permit # \_\_\_\_\_

(API No. If Drill Pit)

Identify: Emergency Pit \_\_\_\_\_ Burn Pit \_\_\_\_\_

Storage Pit \_\_\_\_\_ Drill Pit \_\_\_\_\_

Effective Date of Transfer 6-1-98

Lease Name ANNA

Sec 8 T 30S R 8 W

Legal Description of Lease: \_\_\_\_\_

SW/4 NW/4 & S/2

County Kingman

Production Zone(s) Miss.

Injection Zone(s) \_\_\_\_\_

\_\_\_\_\_ Feet from N/S Line of Section

\_\_\_\_\_ Feet from E/W Line of Section

✓ Past Operator's License No. 5003

Past Operator's name and address:

McCoy Petroleum Corporation

3017 N. Cypress

Wichita, KS 67226-4003

Contact Person: Steve O'Neill

Phone: 636-2737

✓ Date: 6/4/98

Title ENGR: PROD MGR.

✓ Signature: [Signature]

New Operator's License No. 31191 ✓

New Operator's Name and Address:

**R & B OIL & GAS, INC.**

P.O. BOX 195

ATTICA, KS 67009

Contact Person: Randy Newberry

Phone: 316 254-7251

Oil/Gas Purchaser Barr Energy, Warren NGL

Date: 7-13-98

Title President

Signature: [Signature]

\*\*\*\*\*  
**ACKNOWLEDGMENT 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 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 \_\_\_\_\_

\* LEASE NAME ANNA

\* LOCATION: Sta 8-305-Sw

WELL NO. (YR DRLD/PRE '67)

(i.e. FSL=Feet from South Line)

**WELL STATUS  
(PROD/TAD  
ABANDONED)**

232

15-095-6061 SW  
1960 FOG 3/6/77  
Anna #1

3500 FSD/FNL

4950 FELHWI

U.S.

Plugged

Anna #28, 9101 MS-19053

2310 FSD/FNL

330 ~~FEI~~/FWL

19

720D

Anna #3 ✓  
15-095-21,570 ✓

20410 ESD/FNL

330 ~~HEI~~/FWI

0.7

P257

FSL/FNL

FEL/FWI

FSL/FNL

FEL/FWI

FSL/FNI

FEL/FWI

FSL/FNL

FEL/FWI

FSL/FNI

FEL/HW

FSL/FNI

HEL/HW

FSL/FNI

**FEL/FW**

FSL/HNI

HELFW

# ISL/FNI

HEL/FW.

FSL/FNI

FELFW

ESL/HN

FEL/FW

**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.