PECEIVE STATE ***********************************	[] WICHITA, KANSAS 67202 抗肺毒素病的
Check Applicable Boxes: JUL 0 6 19	
[] Oil Lease: No. of Wells 7-6-1. Wichita, Kansas	Lease Name SCRIETO
[X] Gas Lease: No. of Wells 2 ** ** SIDE TWO MUST BE COMPLETED **	0 00 1 0000
[] Saltwater Disposal Well - Docket No. Spot Location: feet from N/	Legal Description of Lease:
feet from E/ [] Enhanced Recovery Proj. Docket No	W Line
Entire project: Yes/No Number of injection wells*	Production Zone(s)
Field Name Goodland	Injection Zone(s)
Surface Pond Permit # (API No. If Drill P	
Identify: Emergency Pit Burn Pit	Storage Pit Drill Pit Drill Pit
*********	***********
Past Operator's License No. 30689	Contact Person: R. P. Meabon
Past Operator's Name and Address: Marathon Oil Company	Phone: (307) 587-4961
1501 Stampede Avenue	Date
Cody, WY 82414 Title Regulatory Coordinator	- O 0,000
***********************	Signature My Pole
New Operator's License No. 30282	Contact Person John Sanders
New Operator's Name and Address	Phone (785) 899-5684 -
Lobo Production, Inc.	Peoples thru July
6715 Road 22	Oil/Gas Purchaser KS Gas Mkt.beginning Aug.
Goodland, KS 67735	Date 6-30-98
Title President	Signature falul larders
ACKNOWLEDGEMENT OF TRANSFER: The above	*********
surface pond permit # has been of the Kansas Corporation Commission. The	request for transfer of injection authorization, noted, approved and duly recorded in the records is acknowledgement of transfer pertains to Kansas ses not convey any ownership interest in the above
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 #
Date	Date
Authorized Signature	Authorized Signature
· · · · · · · · · · · · · · · · · · ·	Form T1 7/94

KANSAS CORPORATION COMMISSION

CONSERVATION DIVISION

130 S MARKET, ROOM 2078

RANSFER OF INJECTION AUTHORIZATION

OR TRANSFER OF SURFACE POND PERMIT

*LOCATION: C/SE & SESW, Sec. 32, T7S, R39W

*LEASE NAME Schield

A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

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