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4 SEC. T 29 S. R 15 W~~AB~~

☒ Oil Lease; No. of Wells 1

[ ] Gas Lease; No. of Wells

**[ ] Saltwater Disposal Well**

**[ ] Enhanced Recovery Project**

Docket # \_\_\_\_\_ (if SWD or ER)

Field Name Springvale NW

**Contact Person** James R. Payne

**Phone** (405) 557-9400

Oil/Gas Purchaser Mustang Fuel Corp./

Date 9/12/90

Signature James R Payne  
15-151-21516-0000

Title Vice President of Production

Contact Person Alan Ashley

Phone (214) 369-9266

011/Gas Purchaser Mustang Fuel Corp./

**Date** 9-11-90

Signature Al Bush

Title Regulatory Administrator

FOR COMMISSION USE ONLY WITH INJECTION WELLS

It is acknowledged by the Kansas Corporation Commission that:

\_\_\_\_\_ is the new operator of the above named well and  
may: \_\_\_\_\_ continue to injection fluid as authorized by Docket # \_\_\_\_\_  
\_\_\_\_\_ not inject fluids until the following action is taken. \_\_\_\_\_.

### Administrative Action

## Technical Review

**Date**

Authorized Signature

U-2/OG-2  
1/88