

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

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

\*\*\*\*\*

Check Applicable Boxes:

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

[X] Gas Lease: No. of Wells 1 \*\*

\*\* 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 \_\_\_\_\_ \*\*

Effective Date of Transfer August 1, 1998

Lease Name ANDERSON

- - SW - SW Sec 31 T 19 R 39 N/E

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

County GREELEY

Production Zone(s) CHASE

Field Name BRADSHAW GAS AREA

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

\*\*\*\*\*

Surface Pond Permit # \_\_\_\_\_ Feet from N/S Line of Section  
(API No. If Drill Pit) \_\_\_\_\_ Feet from E/W Line of Section

Identify: Emergency Pit ☐ Burn Pit ☐ Storage Pit ☐ Drill Pit ☐ *JS*

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Past Operator's License No. 5263 ✓ Contact Person: DALE J. LOLLAR

Past Operator's Name and Address:

MIDWESTERN EXPLORATION CO.

PO BOX 1884

LIBERAL KS 67905-1884 PRESIDENT

Phone: 316-624-3534

Date September 28, 1998

Signature *DALE J. LOLLAR*

New Operator's License No. 31709 ✓

Contact Person W. ROB WILLIAMS

New Operator's Name and Address

W. R. WILLIAMS

PO BOX 15163

AMARILLO TX 79105

Phone 806-374-4555

Oil/Gas Purchaser NATURAL GAS CLEARINGHOUSE

Date September 28, 1998

Title OWNER

Signature *WR Williams*

\*\*\*\*\*  
**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 # \_\_\_\_\_

Date \_\_\_\_\_  
Authorized Signature \_\_\_\_\_

Date \_\_\_\_\_  
Authorized Signature \_\_\_\_\_

Form TI 7/94

EPR

**\*LOCATION:** SW SW Sec. 31-19S-39W, Greeley County, KS

ANDERSON

**\*LEASE NAME**

API NO.  
(YR DR1D/PRE '67)

FOOTAGE FROM SECTION LINE  
(i.e. FSL=Feet from South Line)

TYPE OF WELL  
(OIL/GAS  
INJ/WSW)

WELL STATUS  
(PROD/TA'D  
ABANDONED)

15-071-20167

660

Circle  
FSL/FNL 660

## GAS

PROD

**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.