

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

KDOR: 219564

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 9/1/97

Lease Name Stanley #2-24

- NE - SW - SW Sec 24 T 32S R 32 W/E

Legal Description of Lease: S/2 Sec. 23 and
the S/2 of Sec. 24-32S-32W

County Seward

Production Zone(s) Chase

Field Name Chinook (Fedder)

Injection Zone(s) _____

Surface Pond Permit # _____
(API No. If Drill Pit)

_____ Feet from N/S Line of Section

_____ Feet from E/W Line of Section

Identify: Emergency Pit ☐

Burn Pit ☐

Storage Pit ☐

Drill Pit ☐

Past Operator's License No. 06230

Contact Person: Bill Carlisle

Past Operator's Name and Address:

First National Oil, Inc.

23 E. 11th Street

Liberal, KS 67901

Title President

Phone: 316-624-1664

Date December 15, 1997

Signature _____

New Operator's License No. 8061

Contact Person John S. Weir

New Operator's Name and Address

Phone 316-681-0231

Oil Producers, Inc. of Kansas

P.O. Box 8647

Wichita, Ks. 67208

Oil/Gas Purchaser Aurora Natural Gas

Date 12/17/97

Title PRESIDENT

Signature John S. Weir

ACKNOWLEDGEMENT 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. 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 _____

Gerald O. Reiss and Kathryn Reiss

API NO.
(YR DRLD/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)

*LOCATION: SW/4 Sec. 24-32S-32W, Seward County

175-20726-0002

066

Circle
FSL/FNL

066

Circle
FWI

Gas

PROD.

RECEIVED
KANSAS CORP COMM
1997 DEC 19 1 44

FSL/ENT

TMA/TBA

ESL/FNL

FEL/FWI

FSL/FNL

FEEL/FWI

FSL/FNL

FEL/FWI

FSL/FNL

FEL/FWI

FSI/FNL

FEEL/FWI

EST./FNT.

FEL/FWI

FST./ENT.

FBI/FBI

FST./ENT.

FET./FMT

FST/ENT

FET./SWT

RECT / FAIR

LEFT / RIGHT

DAY / DTT

PLAT / PLAT

1

11

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.