

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:

[X] Oil Lease: No. of Wells 1 **

[] Gas Lease: No. of Wells **
** SIDE TWO MUST BE COMPLETED **

[X] Saltwater Disposal Well - Docket No. 019-494
Spot Location: 4290 feet from N/S Line
1650 feet from E/W Line

[] Enhanced Recovery Proj. Docket No.
Entire project: Yes/No
Number of injection wells **

7-1-00 Effective Date of Transfer

Lease Name Bradford

Sec 35 T 30 R 9 W/E
26 30 9

Legal Description of Lease:

NE/4 35-30-9 And SE/4 26-30-9

County ELK

Production Zone(s) Mississippi

Injection Zone(s) Arbuckle

Field Name Love

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 ☐ Ar

Past Operator's License No. 03591

Contact Person: Ed Triboulet

Past Operator's Name and Address:

C+E Oil
At 1 Box 182
Moline, KS 67353

Phone: 316-647-3601

Date 9-20-00

Signature Ed Triboulet

Title Owner

New Operator's License No. 31119

Contact Person Robert Wolfe

New Operator's Name and Address:

Lone Wolf Oil
Box 241
Moline, KS 67353

Phone 316-647-3626

Oil/Gas Purchaser Plains Marketing

Date 9-18-00

Signature Robert Wolfe

Title Owner

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
Conservation Division
Wichita, Kansas
Authorized Signature

Form T1 7/94

MUST BE FILED FOR ALL WELLS

SIDE 2

T1 7/94

*LEASE NAME <u>Bradford</u>		*LOCATION <u>NE/4 25-30-9E</u>		
WELL NO.	APII 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)
#1 SWD	C-19,994	1290 <u>FSL/FNL</u> 1650 <u>FEL/FWL</u>	SWD	Injection
#1 ✓	049-20645	330 <u>FSL/FNL</u> 330 <u>FEL/FWL</u>	Oil	Prod.
		<u>FSL/FNL</u> <u>FEL/FWL</u>		
		<u>FSL/FNL</u> <u>FEL/FWL</u>		
		<u>FSL/FNL</u> <u>FEL/FWL</u>		
		<u>FSL/FNL</u> <u>FEL/FWL</u>		
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		<u>FSL/FNL</u> <u>FEL/FWL</u>		
		<u>FSL/FNL</u> <u>FEL/FWL</u>		
		<u>FSL/FNL</u> <u>FEL/FWL</u>		
		<u>FSL/FNL</u> <u>FEL/FWL</u>		
		<u>FSL/FNL</u> <u>FEL/FWL</u>		

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.