

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 3 \*\*

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

\*\* SIDE TWO MUST BE COMPLETED \*\*

[✓] Saltwater Disposal Well - Docket No. CD-48235 (C-20,838)

Spot Location: 165 feet from (N/S) Line

165 feet from (E/W) Line

[ ] Enhanced Recovery Proj. Docket No. \_\_\_\_\_

Entire project: Yes/No

Number of injection wells \_\_\_\_\_ \*\*

Effective Date of Transfer 11-1-98

Lease Name WEEKS

E/2-SE - Sec 9 T35S R15 #(E)

Legal Description of Lease: E/2 SE/4

SEC. 9, TWP. 35S R6E. 15E

County MONTGOMERY

Production Zone(s) BARTLESVILLE

Field Name TYRO

Injection Zone(s) MISSISSIPPI

Surface Pond Permit # N/A  
(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. 30406 ✓

Contact Person: BOB MARTIN

Past Operator's Name and Address:

Phone: 918-255-3203

BOB MARTIN  
RT. 1, Box 225  
WANN, OK 74083

Date 11-9-98

Title OWNER

Signature [Signature]

New Operator's License No. 32306 ✓

Contact Person JEFF L. MORRIS

New Operator's Name and Address

Phone 316-251-1465

AUTRY C. STEPHENS  
1708 W. 54<sup>th</sup> ST.  
COFFEYVILLE, KS 67337

OIL = FARMLAND  
Oil/Gas Purchaser GAS = O-K GAS SERVICES

Date 11-9-98

Title OWNER

Signature [Signature]

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

\*LOCATION: E/2 SE/4 9-355-15-E

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

TYPE OF WELL (OIL/GAS INJ/WSW)	WELL STATUS (PROD/TA'D ABANDONED)

#2  
K  
2000  
FSL/FMT  
1485  
FEL/FMT  
01C  
P200

**FSL/FNL** \_\_\_\_\_ **FEL/FWL** \_\_\_\_\_

**FSL/PNL** \_\_\_\_\_ **FEL/FWL** \_\_\_\_\_

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\_\_\_\_\_ FSL/FNL \_\_\_\_\_ FEL/FWL \_\_\_\_\_

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**FSL/FNL** \_\_\_\_\_ **FEL/FWL** \_\_\_\_\_

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FSL/FNL FSL/FNL

\_\_\_\_\_ FSL/FNL \_\_\_\_\_ FEL/FWL \_\_\_\_\_

\_\_\_\_\_ FSL/FNL \_\_\_\_\_ FEL/FWL \_\_\_\_\_

**A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY**

\*when transferring a unit which consists of more than one lease please file a separate slide two for