121598 WW Johnson.pdf

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

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Check Applicable Boxes:

[X] Oil Lease: No. of Wells 4 **

[ ] Gas Lease: No. of Wells _____ **
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 _____**

Field Name Ritz-Canton

Effective Date of Transfer 12-15-98

Lease Name W. W. Johnson

___-___-___-___ **Sec** 4 **T** 19 **R** 2 **W/** **

Legal Description of Lease: _____

E/2 SE/4 4-19-2W

County McPherson

Production Zone(s) Mississippi

Injection Zone(s) _____

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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 ☐

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Past Operator's License No. 5663

Past Operator's Name and Address:
Hess Oil Company
P.O.Box 1009
McPherson, KS 67460

Contact Person: Bryan Hess

Phone: 316-241-4640

Date 1-6-99

Signature Bryan Hess Manager

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New Operator's License No. ~~3365~~ 5563

New Operator's Name and Address

D & R Oil Properties
P.O.Box 241
Galva, KS 67443

Contact Person Dennis Perera

Phone 316-654-3403

Oil/Gas Purchaser NCRA

Date 1-6-99

Signature Dennis Perera

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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 _____

Date _____ _____
Authorized Signature

_____ is acknowledged as the new operator of the above named lease containing the surface pond permitted by # _____.

RECEIVED
STATE CORPORATION COMMISSION
JAN - 6 19
CONSERVATION DIVISION
Wichita, Kansas

Date _____ _____
Authorized Signature

Form T1 7/94

1<GS

MUST BE FILED FOR ALL WELLS

*LEASE NAME W. W. Johnson

*LOCATION: E/2 SE/4 4-19-2W, McPherson County

WELL NO.	API NO. (YR DRLD/PRE '67)	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)	Circle		Circle		TYPE OF WELL (OIL/GAS INJ/WSW)	WELL STATUS (PROD/TA'D ABANDONED)
1	1130 0248 Drilled 1-1-60	2310'	FSL/	330'	FEL/	(NE NE SE)	Oil	Prod
2	1131 9259 Drilled 4-19-60	1650'	FSL/	330'	FEL/	(SE NE SE)	Oil	Prod
4	1130 1134 Drilled 5-5-61	330'	FSL/	330'	FEL/	(SE SE SE)	Oil	Prod
5	1130 1135 Drilled 8-10-62	330'	FSL/~~FNL~~	990'	FEL/	(SW SE SE)	Oil	Prod
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
			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 side two for each lease. If a lease covers more than one section please indicate which section each well is located.