SKF

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:

Effective Date of Transfer 06/01/95

[X] Oil Lease: No. of Wells 9 **

Lease Name Tom Smith

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

__-__-__-__ Sec 20 T 25S R 16 ~~W~~/E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: N/2 NW/4 & E/2

[ ] Saltwater Disposal Well - Docket No. _____
Spot Location: _____ feet from N/S Line
_____ feet from E/W Line

[X] Enhanced Recovery Proj. Docket No E-15417
Entire project: (Yes)/No
Number of injection wells 2 **

County Woodson

Production Zone(s) Squirrel Sand

Field Name Owl Creek

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. 6228

Contact Person: Robert E. Taylor

Past Operator's Name and Address:
Saco Oil Company
115 W. Fifth, P.O. Box 231
El Dorado, KS 67042

Phone: (316)321-3515

Date 06/20/95

Title Superintendent

Signature Robert E. Taylor

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New Operator's License No. 5935

Contact Person Mark L. Haas

New Operator's Name and Address
Haas Oil Company
P.O. Box 288
Yates Center, KS 66783

Phone (316) 625-2171

Oil/Gas Purchaser EOTT/Plains

Date 6/23/95

Title operator

Signature Mark L. Haas

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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
JUN 30 1995

Date _____ _____
Authorized Signature

Form T1 7/94

SIDE 2
T1 7/94

MUST BE FILED FOR ALL WELLS

*LEASE NAME Tom Smith *LOCATION: 20,25S,16E

WELL NO.	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)
			Circle FSL/FNL		Circle FEL/FWL		
1	12/8/67		FSL/FNL		(FEL)/FWL	oil	prod
2	15-207-21,026	990	(FSL)/FNL	240	FEL/FWL	oil	prod
3	15-207-21,073	990	FSL/(FNL)	900	(FEL)/FWL	inj	prod
4	15-207-21,319	1650	FSL/(FNL)	570	(FEL)/FWL	oil	prod
5	15-207-21,496	2250	FSL/(FNL)	740	(FEL)/FWL	inj	prod
6	15-207-22,286	480	FSL/(FNL)	480	(FEL)/FWL	oil	prod
9	15-207-22,946	1840	FSL/(FNL)	240	(FEL)/FWL	oil	prod
10	15-207-23,701	2440	FSL/(FNL)	240	(FEL)/FWL	oil	prod
11	15-207-24,312	2640	FSL/(FNL)	660	(FEL)/FWL	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		

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.