

REQUEST FOR CHANGE OF OPERATOR  
TRANSFER OF INJECTION AUTHORIZATION  
OR TRANSFER OF SURFACE POND PERMIT

090401 - Spencer.pdf  
KANSAS CORPORATION COMMISSION  
CONSERVATION DIVISION  
130 S MARKET, ROOM 2078  
WICHITA, KANSAS 67202

\*\*\*\*\*  
SCANNED  
Check Applicable Boxes:

☐ Oil Lease: No. of Wells \_\_\_\_\_ \*\*

☒ Gas Lease: No. of Wells 1 \*\*

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

RECEIVED

OCT 15 2002

Effective Date of Transfer SEPT 4, 2001

Lease Name SPENCER

N/2 NE/4 Sec 6 T18 R 21E

Legal Description of Lease: N/2 NE/4

☒ Saltwater Disposal Well - Docket No. \_\_\_\_\_

Spot Location: \_\_\_\_\_ feet from S Line

\_\_\_\_\_ feet from E Line

KCC WICHITA

SEC. 6-18-21E

☐ Enhanced Recovery Proj. Docket No. \_\_\_\_\_

Entire project: Yes/No

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

Field Name UNKNOWN

County FRANKLIN

Production Zone(s) PERU

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 \_\_\_\_\_

KB

\*\*\*\*\*  
Past Operator's License No. 30787 ✓

8-30-2001

Contact Person: John Adger

Phone: 301-622-4295

Date 9/24/02

Signature [Signature]

Past Operator's Name and Address:

OWI Operating Company LC

227 S. Main

Ottawa, KS. 66067

Title Partner

Contact Person DENNIS KERSHNER

Phone 620-365-3111

Oil/Gas Purchaser ONEOK

Date 8-5-02

Signature [Signature]

New Operator's License No. 5150 ✓

New Operator's Name and Address

COLT ENERGY, INC.

P.O. BOX 388

IOLA, KS 66749

Title OFFICE MANAGER

**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 # \_\_\_\_\_

Date \_\_\_\_\_

Authorized Signature \_\_\_\_\_

Form T1 7/94

**MUST BE FILED FOR ALL WELLS**

SIDE 2  
T1 7/94

\*LEASE NAME SPENCER

\*LOCATION: SEC. 6-18-21 FRANKLIN COUNTY

WELL NO.      API NO.  
(YR DRLD/PRE '67)

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

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

		<b>Circle</b>		<b>Circle</b>		
3	N/A 15-059-24,848	✓ 4654FSL	1639FEL	GAS	PROD	

SCANNED

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.