

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:

RECEIVED
STATE COMMISSION

Effective Date of Transfer 7-1-98

Effective Date of Sale 6-1-98

Lease Name Koller

[] Oil Lease: No. of Wells JUL 10 6 1998

NW - NW - - Sec 4 T 8S R 39 W 39

[X] Gas Lease: No. of Wells CONSERVATION DIVISION
** SIDE TWO MUST BE COMPLETED ** Wichita, Kansas

Legal Description of Lease: _____

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

County Sherman

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

Production Zone(s) _____

Field Name Goodland

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 ☐

Past Operator's License No. 30689 ✓

Contact Person: R. P. Meabon

Past Operator's Name and Address:
Marathon Oil Company
1501 Stampede Avenue
Cody, WY 82414

Phone: (307) 587-4961

Date 6-30-98

Title Regulatory Coordinator

Signature RP Meabon

New Operator's License No. 30282 ✓

Contact Person John Sanders

New Operator's Name and Address
Lobo Production, Inc.
6715 Road 22
Goodland, KS 67735

Phone (785) 899-5684

Oil/Gas Purchaser Peoples thru July
KS Gas Mkt. beginning Aug.

Date 6-30-98

Title President

Signature John P. Sanders

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 _____
Authorized Signature _____

Form T1 7/94

EPR

SIDE 2
T1 7/94

*LOCATION: NW Sec.4, T85S, R39W

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

(4880) Circle
3980 FSI/FNL

(3040) Circle
4580 FEL/FWL

Prod

[illegible]

*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.