

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

KDOR: 118516

Check Applicable Boxes:

[X] Oil Lease: No. of Wells 2 **

[] 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 **

Effective Date of Transfer 8-31-97

Lease Name Bowlby "A"

23-11S - 23 16 16 W/E
Sec T6W R

Legal Description of Lease:

23-11S-16W
The Northeast Quarter (NW 1/4)

County Ellis

Production Zone(s) Lansing K.C.

Field Name RCB

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. 9394 ✓ Contact Person: Alfred Dreiling

Past Operator's Name and Address: Phone: 913 735-9325

D-Oil Co., Inc.
402 Main, P.O.Box 278
Victoria, Ks. 67671

Title Date 8-31-97

New Operator's License No. 31385 ✓ Signature Marion Counts
Contact Person Marion Counts

New Operator's Name and Address Phone: 913-483-4357

M G Oil Inc, Oil/Gas Purchaser NCRA

P. O. Box 162

Russell, Ks. 67665

Title President Signature Marion Counts

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 #

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

Recommended action

Date Date

Authorized Signature Authorized Signature

Form T1 7/54

ERR

23-11-16

23-11-16

Rowell B. A.

API NO.
(YR DRDL/PRE '67) -

**TYPE OF WELL
(OIL/GAS
INJ/MSW)**

**(OIL/GAS
INT/MSW)**

15-051-22977
4-21-82

8-26-82

Oil
Oil

Prop
Prop

FSL/FNL **FEL/FWL**

FEL/FWI

FST./FNT. **FEL./FMY.**

FEI / FEIT

FOR / EMT
RET / EMT

1-22-48433 MAY / 1971

Figure 1

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WISCONSIN

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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.