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

KANSAS CORPORATION COMMISSION
CONSERVATION DIVISION
130 S MARKET, ROOM 2078
WICHITA, KANSAS 67202

KDOR: 205498

Check Applicable Boxes:

Effective Date of Transfer 9/1/95

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

Lease Name #1-29 Adams

[X] Gas Lease: No. of Wells 1 **

___-SE-NW-NW Sec 29 T34S R 29 (W) E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: _____

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

NW/4 Sec. 29-T34S-R29W

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

County Meade

Production Zone(s) Morrow

Field Name Adams Ranch

Injection Zone(s) None

Surface Pond Permit # N/A
(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. 30349

Contact Person: Alan Banta

Past Operator's Name and Address:
Vess-Transpacific Operating Co., Inc.
P.O. Box 1639
Wichita, KS 67201-1639

Phone: 316-262-3596

Date 8/30/95

Title Vice-President

Signature Alan D. Banta

New Operator's License No. 9408

Contact Person Alan Banta

New Operator's Name and Address
Trans Pacific Oil Corporation
1000 One Main Place
Wichita, KS 67202

Phone 316-262-3596

Oil/Gas Purchaser Colorado Interstate Gas Co

Date 8/30/95

Title Vice-President

Signature Alan D. Banta

ACKNOWLEDGEMENT OF TRANSFER: The above request for transfer of injection authorization surface pond permit # _____ has been noted, approved and duly recorded in the record 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 # _____

SEP 1 1995

Date _____ Authorized Signature

Form T1 7/

P

T1 7/94

MUST BE FILED FOR ALL WELLS

***LEASE NAME** Adams

***LOCATION:** SE NW NW Sec. 29-T34S-R29W

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)
#1-29	15-119-10331-0000 1960	990	Circle FSL/(FNL)	990	Circle FEL/(FWL)	Gas	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		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		

RECEIVED
STATE CORPORATION COMMISSION
SEP 1 1995

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
If a lease covers more than one section please indicate which section each well is located.