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## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1 June 2000 Form must be Typed Form must be Signed All blanks must be Fified

## REQUEST FOR CHANGE OF OPERATO KCC WICHITA TRANSFER OF INJECTION OR SURFA

Check Applicable Boxes:	Effective Date of Transfer: December 1, 2001		
Oil Lease: No. of Wells_1**	Lease Name: Paxson 11-1		
Gas Lease: No. of Wells**	· ·		
** Side Two Must Be Completed.	E/2 - E/2 - Ne/- Sec. 11 Twp. 8s R. 24 E		
Saltwater Disposal Well - Docket No.	Legal Description of Lease:  NE/4 of section 11-8s-24w 160 acres		
Spot Location: feet from N / S Line	NE/4 of Section 11-85-24w 100 acres		
feet from E / W Line			
Ephanced Recovery Project Docket No.	County: Graham		
Entire Project: Yes No	Production Zone(s): <u>lkc</u>		
Number of Injection Wells**	Injection Zone(s):		
Field Name:pRAXSON	Injection Zone(s).		
Surface Pond Permit #	feet from N / S Line of Section		
(API # If Drill Pit)	feet from E / W Line of Section		
Identify:	Storage Pit Drill Pit		
Past Operator's License No. 6861 ✓	Contact Person: Ron Nickleson		
Past Operator's Name & Address: Ron's Oil Operations, Inc.	Phone: 785-421-2315		
RFD 1 Bjox 112 Penokee, Kansas 67659	Date: April 2, 2002		
	$\sim n \cdot 1$		
Title: Owner/Operator	Signature: 1000 Purible Have		
New Operator's License No. 31008	Contact Person: Paul or Terrii Bowman		
New Operator's Paul Bowman Oil Company	Phone: 785-434-2633		
801 Codell Road	Oil / Gas Purchaser: NCRA		
Codell, Kansas 67663-8500	Date: April 2, 2002		
	Signature X Paul R' Bloowman		
Title: Owner/Operator	Signature 1 CM I I COM TO SIGNATURE		
Acknowledgment of Transfer. The above request for transfer of injection	authorization, surface pond permit # has been		
	ration Commission. This acknowledgment of transfer pertains to Kansas		
Corporation Commission records only and does not convey any ownership			
	· · · · · · · · · · · · · · · · · · ·		
is acknowleged as the	is acknowleged as the		
new operator and may continue to inject fluids as authorized by	new operator of the above named lease containing the surface pond		
Docket # Recommended action:	permitted by #		
Date:	Date:		
Authorized Signature	Authorized Signature		

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202





## Must Be Filed For All Wells

Part of Mary

* Lease Name:	Paxson 11-1		*Location:	- C OF E 1/2 NE	- TINDAY
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)
<del>C O</del> F	/6-065-22/30 E <sup>1</sup> / <sub>2</sub> NE	Circle 38∞ (SDFNL	Circle 380 FEDT-WL	OIL PRODUC	ING_I
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL _		

A separate sheet may be attached if necessary

<sup>\*</sup> 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.