

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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

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

DOR 210353

Check Applicable Boxes:

- ☐ Oil Lease: No. of Wells _____ **
☒ Gas Lease: No. of Wells 1 **

** Side Two Must Be Completed.

☐ Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N / S Line

_____ feet from E / W Line

☐ Enhanced Recovery Project Docket No. _____

Entire Project: ☐ Yes ☐ No

Number of Injection Wells _____ **

Field Name: Medicine Lodge NEffective Date of Transfer: January 1, 2003Lease Name: Hospital

_____ SE _____ SE _____ NW Sec. 7 Twp. 33 R. 12 ☐ E ☒ W

Legal Description of Lease: NW 7-33S-12WCounty: BarberProduction Zone(s): Mississippian

Injection Zone(s): _____

Surface Pond Permit # _____
(API # 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 PitPast Operator's License No. 5506

Past Operator's Name & Address: Woolsey Petroleum Corporation
125 N. Market, Suite 1000, Wichita, Kansas 67202-1775

Title: Operations ManagerContact Person: Dean PattisonPhone: 316-267-4379 (ext 107)Date: January 22, 2003

Signature: _____

New Operator's License No. 33168

New Operator's Name & Address: Woolsey Operating Company, LLC
125 N. Market, Suite 1000, Wichita, Kansas 67202-1775

Title: Operations ManagerContact Person: Dean PattisonPhone: 316-267-4379 (ext 107)Oil / Gas Purchaser: Plains Marketing / Bluestem Gas MarketingDate: January 22, 2003

Signature: _____

Acknowledgment 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 acknowledgment 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

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

2/17/03 FEB 19 2003 2/03

* 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.