

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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

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

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: Ritz-Canton

Effective Date of Transfer: January 1st, 2003

Lease Name: Klinkerman

Sec. 08 Twp. 20S R. 1 ☐ E ☒ W

Legal Description of Lease: _____

N/2 NE/4 8-20-1W

County: McPherson

Injection Zone(s): Mississippi

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 Pit

Past Operator's License No. 5172

Past Operator's Name & Address: SCHULZ OIL & GAS INC

P O BOX 273, 136 N MAIN STREET, CANTON KS
67428

Title: PRESIDENT

Contact Person: Roger A Schulz

Phone: (620) 628-4431

Date: January 2nd, 2003

Signature: Roger A Schulz

New Operator's License No. 5399

New Operator's Name & Address: AMERICAN ENERGIES CORP

MARKET CENTER BLDG, 155 N MARKET STE 710

WICHITA KS 67202

Title: PRESIDENT

Contact Person: Alan L DeGood

Phone: (316) 263-5785

Oil / Gas Purchaser: Mac County Gas Inc

Date: 4/29/03

Signature: Alan L DeGood

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

Must Be Filed For All Wells

* Lease Name: Klinkerman * Location: N/2 NE/4 8-T20S-R1W

[illegible]

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.