

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 205606

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-CantonEffective Date of Transfer: January 1st, 2003Lease Name: Tri-B Gas Well_____ Sec. 04 Twp. 20S R. 1 ☐ E ☒ W

Legal Description of Lease: _____

E/2 NW/4 04-20-1WCounty: McPhersonInjection Zone(s): Mississippi

Injection Zone(s): _____

RECEIVED

MAY 07 2003

KCC WICHITA

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

KBE

Past Operator's License No. 5172Past Operator's Name & Address: SCHULZ OIL & GAS INCP O BOX 273, 136 N MAIN STREET, CANTON KS
67428Title: PRESIDENTContact Person: Roger A SchulzPhone: (620) 628-4431Date: January 2nd, 2003Signature: Roger A. SchulzNew Operator's License No. 5399New Operator's Name & Address: AMERICAN ENERGIES CORPMARKET CENTER BLDG, 155 N MARKET STE 710WICHITA KS 67202Title: PRESIDENTContact Person: Alan L DeGoodPhone: (316) 263-5785Oil / Gas Purchaser: Mac County Gas, Inc.Date: 4/29/03Signature: 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

DOR 5/8/03 MAY 09 2003 JIC 5/07

Must Be Filed For All Wells

* Lease Name: Tri-B Gas Well

* Location: E/2 NW/4 04-T20S-R1W

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)
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[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.