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

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

DOR 120140

Check Applicable Boxes:

[✓] Oil Lease: No. of Wells 3 **

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

** SIDE TWO MUST BE COMPLETED **

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

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

Field Name Green

Effective Date of Transfer 1-3-2001

Lease Name "Nelson A"

__-__-__-__ Sec 14 T 19S R 6W W/E

Legal Description of Lease: NE/4 of Sec 14-19S-6W

County Rice County, Ks.

Production Zone(s) Conglomerate/Mississippi

Injection Zone(s) None

Surface Pond Permit # None (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. 32571

Past Operator's Name and Address:
Daniel J. Ryan
6300 S. Western
Okla. City OK. 73139

Title OWNER

Contact Person: DAN RYAN OR JOE FAIR

Phone: 405-631-6300

Date Dec. 31, 2000

Signature Daniel J. Ryan

New Operator's License No. 32081

New Operator's Name and Address
Smokey Valley Resources, Inc.
1325 Hwy 56
Lyons, Ks. 67554

Title President

Contact Person George Saling

Phone 316-257-5529

Oil/Gas Purchaser Equilon Enterprises, Inc. Houston, Tx. 77002

Date 1-3-2001

Signature George Saling

ACKNOWLEDGEMENT OF TRANSFER: The above request for transfer of injection authorizatic surface pond permit # _____ has been noted, approved and duly recorded in the recor of the Kansas Corporation Commission. This acknowledgement of transfer pertains to Kans Corporation Commission records only and does not convey any ownership interest in the abo 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 t new operator of the above named lease containi the surface pond permitted by _____

RECEIVED
KANSAS CORPORATION COMMISSION
JAN 08 2001
CONSERVATION DIVISION
WICHITA, KS

Date _____ Authorized Signature

EP&R 5/15/01; PROD 1 7 2001 INJ 5/01 DIST 5/14/01

Form T1 7.

MUST BE FILED FOR ALL WELLS

*LEASE NAME Nelson "A"

*LOCATION: 14-19-6W

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)
			Circle		Circle		
2-14	15-159-21,396 ✓	2970	(FSL)/FNL	990	(FEL)/FWL	Oil	Prod
4-14	15-159-21-648 ✓	1650	FSL/(FNL)	330	(FEL)/FWL	Oil	Prod
6-14	15-159-22-212 ✓	4950	(FSL)/FNL	1650	(FEL)/FWL	Oil	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		

A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

If you have wells in more than one lease please file a separate side two for

SCANNED