

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

DOR 207993

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: PANOMA COUNCIL GROVE

Effective Date of Transfer: 1-30-02

Lease Name: SALYER 1-2

_____ - _____ - _____ Sec. 33 Twp: 23 R 37 ☐ E ☒ W

Legal Description of Lease: SW/4

County: KEARNY

Producing Zone(s): COUNCIL GROVE

Injection Zone(s): _____

RECEIVED

MAR 22 2002

KCC WICHITA

Surface Pond Permit # _____ feet from N/S Line of Section
(API # If Drill Pit) _____ feet from E/W Line of Section

Identify: ☐ Emergency Pit ☐ Burn Pit ☐ Storage Pit ☐ Drill Pit

Past Operator's License No. 30332

Past Operator's Name & Address: ENERGY DEVELOPMENT CORP.

12600 NORTHBOUROUGH #250 HOUSTON, TX 77067

Title: Production Superintendent

Contact Person: Gary Brune

Phone: 281/876-6150

Date: 3/18/02

Signature: [Signature]

New Operator's License No. 32987

New Operator's Name & Address: SAMEDAN OIL CORPORATION

12600 NORTHBOROUGH #250

HOUSTON, TX 77067

Title: REGULATORY ANALYST

Contact Person: BARBARA GODEJOHN

Phone: 281-876-6150

Oil / Gas Purchaser: Enserco

Date: 3-14-02

Signature: [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

Must Be Filed For All Wells

* Lease Name: SALYER * Location: SW14

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/W/SW)	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.