

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

ME

Check Applicable Boxes:

Effective Date of Transfer 3/1/98

[X] Oil Lease: No. of Wells 2

RECEIVED
KANSAS CORP
1998 APR 27

Lease Name Look

[] Gas Lease: No. of Wells _____

** SIDE TWO MUST BE COMPLETED **

1-10 - SW - SW Sec 17 T 7 R 17 W/R

[X] Saltwater Disposal Well - Docket No. _____

Spot Location: 990 feet from N/E Line

330 feet from E/W Line

Legal Description of Lease: _____

SW/4-SW/4 (40 Ac)

[] Enhanced Recovery Proj. Docket No. _____

Entire project: Yes/No

Number of injection wells _____ **

County Rooks

Production Zone(s) Arbuckle/Lansing KC

Field Name Riffe

Injection Zone(s) _____

Surface Pond Permit # _____

(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. 7011

Contact Person: Theron Monroe

Past Operator's Name and Address:

Ione Monroe DBA Rim Oil Co.
Hays, KS 67601

Phone: 785-425-6710

Date 3/1/98

Title Owner

Signature Ione Monroe

New Operator's License No. 7076

Contact Person Kenneth Vehige

New Operator's Name and Address

Black Diamond Oil, Inc.
P.O. Box 641
Hays, KS 67601

Phone 785-625-5891

Oil/Gas Purchaser Farmland

Date 3/1/98

Title Owner

Signature Kenneth Vehige

ACKNOWLEDGEMENT 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 acknowledgement 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 _____

Form T1 7/94

EPR

MUST BE FILED FOR ALL WELLS

***LEASE NAME** Look

*LOCATION: SW-SW Swec 17-7-17W

WELL NO.	API NO.	(YR DRILD/PRE '67)
1	2	3
4	5	6
7	8	9
10	11	12
13	14	15
16	17	18
19	20	21
22	23	24
25	26	27
28	29	30
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358	359	360
361	362	363
364	365	366

FOOTAGE FROM SECTION LINE
(i.e. FSL=Feet from South Line)

TYPE OF WELL (OIL/GAS INJ/WSW)	WELL STATUS (PROD/TA'D ABANDONED)

WELL STATUS
(PROD/TA'D
ABANDONED)

Circle	Circle
990	330
FSL/POL	REL/FWL

Prod

TA'd

15-163-22.283
10-26

15-163-22,351

A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

*When transferring a unit which consists of more than one lease please file a separate sheet for each lease. If a lease covers more than one section, please indicate which section each well is located.