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

SCANNED

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Check Applicable Boxes: J DOR 130111

Effective Date of Transfer 3-20-99

[X] Oil Lease: No. of Wells 2 **

Lease Name Cannon B

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

SW - NE - NW - ___ Sec 22 T 26 R 18 W(E)

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: _____

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

SW/4 of NE/4 of NW/4

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

County Allen

Production Zone(s) Bartlesville

Field Name Humboldt

Injection Zone(s) _____

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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 ☐ JR

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Past Operator's License No. 5963

Contact Person: B. Willis

Past Operator's Name and Address:
Willis Energy
Rt. 2, Box 255
Neodesha, Ks. 66757

Phone: 1-620-325-5189

Date 8/9/01

Title Owner

Signature Barbara A. Willis Executrix

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New Operator's License No. 6448

Contact Person Richard Winn

New Operator's Name and Address
Lincoln 77
PO Box 60566
Colorado Springs, CO 80690

Phone 1-620-431-7582

Oil/Gas Purchaser Crude Marketing

Date 8-23-2001

Title Agent

Signature Richard E. Winn V.P.

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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

SEP 10 2001

KCR 9/6/01 PROD _____ UIC 9/01

Form T1 7/94

SIDE 2
T1 7/94

MUST BE FILED FOR ALL WELLS

SCANNED

***LEASE NAME** Cannon B ***LOCATION:** S.22 T.26 R.18E Allen Co.

WELL NO.	API NO. (YR DRLD/PRE '67)	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)	Circle		Circle	TYPE OF WELL (OIL/GAS INJ/WSW)	WELL STATUS (PROD/CA'D ABANDONED)
B-1	15-001-28210-0000 ✓	4290	(FSL)/FNL	2970	(FEL)/FWL	Oil	Prod.
B-2	15-001-28211-0000 ✓	4290	(FSL)/FNL	3630	(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		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		

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.