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KCC WICHITA

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form T-1

June 2000

Form must be Typed
Form must be Signed
All blanks must be FilledREQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION OR SURFACE POND PERMIT

DOR 105592

Check Applicable Boxes:

☐ Oil Lease: No. of Wells _____ **☐ Gas Lease: No. of Wells _____ **

** Side Two Must Be Completed.

☒ Saltwater Disposal Well - Docket No. D-27,450Spot Location: App 1980 feet from N / S LineApp 330 feet from E / W Line☐ Enhanced Recovery Project Docket No. _____Entire Project: ☐ Yes ☐ No

Number of Injection Wells _____ **

Field Name: SalinaEffective Date of Transfer: 5/1/2001Lease Name: Clements_____ Sec. 7 Twp. 15S R. 2 ☐ E ☒ WLegal Description of Lease: T15S, R2W, Sec 7SalinaCounty: Salina

Production Zone(s): _____

Injection Zone(s): HuntonSurface 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 PitPast Operator's License No. 6903 6306Contact Person: Marva WalkerPast Operator's Name & Address: Tom Brown Construction Phone: (785) 823-82231505 Ricky Circle, Salina, KS 67401-8384 Date: 5/31/01Title: Owner

Signature: _____

New Operator's License No. 33685 32655Contact Person: Morrie SoderbergNew Operator's Name & Address: Oil PartnersPhone: (785) 826-8216P.O. Box 1851Oil / Gas Purchaser: N/ASalina, KS 67402-1851Date: 5/31/01Title: PartnerSignature: Morrie Soderberg

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.

OIL PARTNERS is acknowledged as the
new operator and may continue to inject fluids as authorized by
Docket # D-27,450 . Recommended action: _____

Date: 12-31-01 Mike Engellbrecht
Authorized Signature CEPAR 4/16/02 MAY 08 2002 UIC 462

_____ is acknowledged as the
new operator of the above named lease containing the surface pond
permitted by # _____

Date: _____
Authorized Signature _____

Side Two

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Must Be Filed For All Wells

KOC NICKITA

* Lease Name: Clements

* Location: T15S, R2W, Sec7, Saline

[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.

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