

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISIONForm T-1  
June 2000Form must be Typed  
Form must be Signed  
All blanks must be FilledREQUEST FOR CHANGE OF OPERATOR  
TRANSFER OF INJECTION OR SURFACE POND PERMIT

DOR Nowe

Check Applicable Boxes:

☐ Oil Lease: No. of Wells \_\_\_\_\_☒ Gas Lease: No. of Wells 3

\*\* 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: \_\_\_\_\_

RECEIVED

JAN 30 2003

WICHITA

Effective Date of Transfer: May 1, 2003Lease Name: SmartSec. 1 Twp. 34 R. 11 ☒ E ☐ WLegal Description of Lease: E/2 of NW/4 + NW/4  
of NE/4 + NE/4 of SW/4 1-34-11ECounty: CDProduction Zone(s): Mississippi/Mulkey

Injection Zone(s): \_\_\_\_\_

Surface Pond Permit # \_\_\_\_\_

(API # If Drill Pit)

\_\_\_\_\_ feet from N / S Line of Section

\_\_\_\_\_ feet from E / W Line of Section KB

Identify:

☐ Emergency Pit☐ Burn Pit☐ Storage Pit☐ Drill PitPast Operator's License No. 6880 Exp. 4/30/03Past Operator's Name & Address: Summer Sun Gas LLCPO Box 339 Sedan KSTitle: MANContact Person: Gary CudePhone: 620 725 3111

Date: \_\_\_\_\_

Signature: Gary A CudeNew Operator's License No. 33067New Operator's Name & Address: Summer Sun Gas IncPO Box 339Sedan KS 67361

Title: \_\_\_\_\_

Contact Person: Gary CudePhone: 620 725 3111Oil (Gas) Purchaser: Sedan Floral

Date: \_\_\_\_\_

Signature: Gary A Cude

**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

\* Lease Name:

\* Location:

# Smart

1-34-11E

Well Status  
(PROD/TA'D/Abandoned)

FEL/FWL

[illegible]

\* 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.