

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

Check Applicable Boxes:

RECEIVED

Effective Date of Transfer 5/1/98

☒ Oil Lease: No. of Wells 3 AUG 27 2004

Lease Name WTHC

☐ Gas Lease: No. of Wells KCC WICHITA - - NE Sec 3 T 14S R 140E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: _____

☒ Saltwater Disposal Well - Docket No. E-4490

Spot Location: 2970 feet from N/S Line

2310 feet from E/W Line

NE/4 3-14-14

☐ Enhanced Recovery Proj. Docket No. _____

County Russell Kansas

Entire project: Yes/No

Number of injection wells _____ **

Production Zone(s) LKC

Field Name Holl Gurney

Injection Zone(s) LKC

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. 30918 ✓

Contact Person: Roy A. Rein

Past Operator's Name and Address:

Phone: 785-483-3519

Rein Resources
4138 Hwy 40
Russell KS 67668

Date 5/1/98

Title operator

Signature Roy A. Rein

New Operator's License No. 31341 ✓

Contact Person: Ward Craig

New Operator's Name and Address:

Phone 785-483-2038

Craig Oil Co.
48 South Kansas
Russell KS 67668

Oil/Gas Purchaser NCRA

Date 5-1-98

Title _____

Signature Ward Craig

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.

Craig Oil Co. is acknowledged as the new operator and may continue to inject fluids as authorized by Docket # E-4490. Recommended action Schedule
MIT w/ Doal immediately!

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

Date 9-23-04 Nylon Bland
Authorized Signature 2

Date _____
Authorized Signature _____

Form T1 7/94

*LEASE NAME

*LOCATION:

API NO.

(YR DRLD/PRE '67)

WELL NO.

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

TYPE OF WELL
(OIL/GAS
INJ/WSW)

WELL STATUS
(PROD/TA'D
ABANDONED)

#1 NJ

15-167-00559-0001

2970

Circle
FSL/FNL 2310

FEL/FWL

AI

#1

15-167-22664-0001

2970

Circle
FSL/FNL 4950

FEL/FWL

Prod

#2

15-167-05200

3330

Circle
FSL/FNL 1660

FEL/FWL

Prod

#3

15-167-02584

3630

Circle
FSL/FNL 330

FEL/FWL

Prod

FSL/FNL

FEL/FWL

FSL/FNL

FEL/FWL

FSL/FNL

FEL/FWL

RECEIVED

AUG 27 2004

KCC WICHITA

FSL/FNL

FEL/FWL

FSL/FNL

FEL/FWL

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FSL/FNL

FEL/FWL

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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.