

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

NR 100990
Check Applicable Boxes:

[x] Oil Lease: No. of Wells 6 **

[] Gas Lease: No. of Wells **

** SIDE TWO MUST BE COMPLETED **

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

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

Field Name Neosho Falls

Surface Pond Permit # _____
(API No. If Drill Pit)

Identify: Emergency Pit ☐ Burn Pit ☐

Effective Date of Transfer 06/01/01

Lease Name Fred Ellis B

SE4 - - - Sec 31 T 23 R 17 W/2

Legal Description of Lease: _____

SE SE

County Woodson

Production Zone(s) Squirrel

Injection Zone(s) _____

_____ Feet from N/S Line of Section

_____ Feet from E/W Line of Section

Storage Pit ☐ Drill Pit ☐ *SE*

Past Operator's License No. 6645

Contact Person: *Jessie S. Folk*

Past Operator's Name and Address:
Norman Bell Oil Company
1252 Bennett St
Iola, KS 66479

Phone: 620-963-2495

Date 06/01/01

Title Owner

Signature *Norman Bell Oil*

New Operator's License No. 32710

Contact Person Kenneth Laymon

New Operator's Name and Address:
Laymon Oil II, LLC
1998 Squirrel Rd
Neosho Falls, KS 66758

Phone 620-963-2495

Oil/Gas Purchaser Kelly MacLaskoy

Date 06/01/01

Title Oper

Signature *Kenneth Laymon*

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

Must Be Filed For All Wells

* Lease Name: Fred Ellis B

* Location: 31/23/17 WO CO

[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.