

TRANSFER OF INJECTION AUTHORIZATION
OR TRANSFER OF SURFACE POND PERMIT

CONSERVATION DIVISION
130 S MARKET, ROOM 2078
WICHITA, KANSAS 67202

SCANNED

Check Applicable Boxes:

DOR 213119

Effective Date of Transfer July 2000

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

Lease Name Cress (Maynard)

[X] Gas Lease: No. of Wells 1 **

NE - NW - NE - Sec 35 T 25 R 17 WE

** 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

NE/4 of S.35 T.25 R.17

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

County Allen

Production Zone(s) Squirrel

Field Name Humboldt

Injection Zone(s) _____

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 ☐ SE

Past Operator's License No. 5963

Contact Person: B. Willis

Past Operator's Name and Address:

Phone: 620 325 5189

Willis Energy
Rt. 2, Box 255
Neodesha, Ks. 66757

Date 8/16/01

Title Owner

Signature *B. Willis* Executrix

New Operator's License No. 32672

Contact Person B. Willis

New Operator's Name and Address

Phone 620 325 5189

Willis Energy
Rt. 2, Box 255
neodesha, Ks. 66757

Oil/Gas Purchaser ONEOK

Date 8/16/01

Title Owner

Signature *B. Willis* 8/16/01

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 _____

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

Date _____
Authorized Signature

Date _____
Authorized Signature

EP&R 9/6/01 PROPOSED 1.0 2001 9/01

AUG 27 2001

Form T1 7/94

MUST BE FILED FOR ALL WELLS

*LEASE NAME	Cress (Maynard)

***LOCATION:** S.35 T.25 R.17 E Allen Co.

WELL NO.:	API NO.	(YR DRLLD/PRE '67)
1	2	3
4	5	6
7	8	9
10	11	12
13	14	15
16	17	18
19	20	21
22	23	24
25	26	27
28	29	30
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358	359	360
361	362	363
364	365	366

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

TYPE OF WELL
(OIL/GAS
INJ/WSW)

**WELL STATUS
(PROPERTY'D
ABANDONED)**

2

15 001 27314

Circle
FSL/FNL 1330

4950

1330

FEEL THE

5
6
7

Prod

FSL/FNL

JUNE / 1993

FSL/FNL

FBI/DOJ

FSL/FNL

FEL/FWI,

FSL/FNL

FBI/FBI

FSL/FNL

THE FBI

FSL/FNL

TME / TEF

FSL/FNL

FEL/FHL

FSL/FNL

THU / FEB

FSL/FNL

FEL/FWL

FSL/FNL

FEL/FWL

TSL/FNL

FEL/FWL

TSL/FNL

THE/FBI

TSL/FNL

TME/T33

TNI/FNL

TME/FWL

TNE/TS.

THF/TEL

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.