070102_W-W-Langhofer.pdf

REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION AUTHORIZATION
OR TRANSFER OF SURFACE POND PERMIT

DOR 216738

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

Check Applicable Boxes:

RECEIVED
NOV 13 2002
KCC WICHITA

Effective Date of Transfer 7-1-2002

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

[X] Gas Lease: No. of Wells 1 **
** SIDE TWO MUST BE COMPLETED **

Lease Name W. W. Langhofer

__-__-__-__ Sec____ T____ R____ W/E

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

Legal Description of Lease: _____

S/2 OF SEC. 18-33S-30W

[ ] Enhanced Recovery Proj. Docket No _____
Entire Project: Yes/No
Number of Injection Wells _____ **

County MEADE

Production Zone(s) Morrow

Field Name Kismet East Morrow

Injection Zone(s) _____

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Surface Pond Permit # _____ _____ Feet from N/S Line of Section
(API No. If Drill Pit) _____ Feet from E/W Line of Section

Identify: Emergency Pit _____ Burn Pit _____ Storage Pit _____ Drill Pit _____ KB

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Past Operator's License No. 6528

Past Operator's name and address:
R. J. Patrick Operating Co.
P. O. Box 1157
Liberal, KS 67905

Contact Person: R J Patrick
Phone: 620-624-1818 - 624-8483
Date: 7-17-02

Title Owner

Signature: R J Patrick

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New Operator's License No. 4064 4067

New Operator's Name and Address:
TKO, INC.
10881 MCARTOR RD.
DODGE CITY, KS 67801

Contact Person: KEVIN TIEBEN
Phone: 620-225-0263
Oil/Gas Purchaser DUKE ENERGY
Date: _____

Title OWNER

Signature: Kevin Tieben

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ACKNOWLEDGMENT OF TRANSFER: The above request for transfer of injection authorization, surface pond permit # _____ has been noted, approved and duly recorded in the record of the 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

Form T1 7/94

Rec'd 11/15/2002 NOV 15 2002 11/02

SIDE 2
T1 7/94

MUST BE FILED FOR ALL WELLS

* LEASE NAME W.W. Langhofer

* LOCATION: S½ Sec 18 - 33 So - 30W - Meade Co.

WELL NO.	API NO. (YR DRLD/PRE '67)	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)		TYPE OF WELL (OIL/GAS INJ/WSW)	WELL STATUS (PROD/TA'D ABANDONED)
		Circle	**Circle**		
1	15-119-20812 ✓	2310 (FSL) FNL	2310 (FEL) FWL	Gas	Producing
		____ FSL/FNL	____ FEL/FWL		
		____ FSL/FNL	____ FEL/FWL		
		____ FSL/FNL	____ FEL/FWL		
		____ FSL/FNL	____ FEL/FWL		
		____ FSL/FNL	____ FEL/FWL		
		____ FSL/FNL	____ FEL/FWL		
		____ FSL/FNL	____ FEL/FWL		
		____ FSL/FNL	____ FEL/FWL		
		____ FSL/FNL	____ FEL/FWL		
		____ FSL/FNL	____ FEL/FWL		
		____ FSL/FNL	____ FEL/FWL		
		____ FSL/FNL	____ FEL/FWL		
		____ FSL/FNL	____ 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.