070104_ Sheneman. pdf

Kansas Corporation Commission Oil & Gas Conservation Division

Form T-1 April 2004 Form must be Typed Form must be Signed All blanks must be Filled

REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Check Applicable Boxes:	1		
✓ Oil Lease: No. of Oil Wells 3 ** Effective Date of Transfer: JULY 1, 2004			
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 102934 Lease Name: SHENEMAN Sec. 8 Twp. 33S R. 6 F W		
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease: W/2 NE/4 8-33S-6E		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: COWLEY		
Number of Injection Wells**	Production Zone(s): MISSISSIPPI		
Field Name: WILSON	i		
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul)	feet from N/ S Line of Section		
	feet fromE / W Line of Section RECEIVED		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling		
Past Operator's License No. 4365	Contact Person: GARY W ANSTINE 47 3 1 2005		
Past Operator's Name & Address: ANSTINE - MUSGROVE OIL CO	Phone: (620) 442-2615 KCC WICHITA		
P O BOX 391, PONCA CITY, OK 74602-0391	Date: _2/10/05		
Title: PARTNER	Signature:		
20105	RECEIVED		
New Operator's License No. 33405	Contact Person: GARY W ANSTINE FEB 1 6 2005		
New Operator's Name & Address: ANSTINE & MUSGROVE INC	Phone: (620) 442-2615		
P O BOX 391	Oil / Gas Purchaser: SEMCRUDE KCC WICHITA		
PONCA CITY, OK 74602-0391	Date: 2/10/05		
Title: VICE PRESIDENT	Signature:		
1110	Olginature.		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #has been		
	ration Commission. This acknowledgment of transfer pertains to Kansas		
Corporation Commission records only and does not convey any ownership			
is acknowleged as the	is acknowleged as the		
new operator and may continue to inject fluids as authorized by	new operator of the above named lease containing the surface pit		
Permit No.: Recommended action:	permitted by No.:		
	,		
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICTEPR 61105	PRODUCTION JUN 0 3 2005 UIC 6/2/05		
Mail to: Past Operator New Operator	District		



Side Two

Must Be Filed For All Wells

* Lease Name	SHENEMAN	* Location:	E/2 W/2 8-33S-6E	
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)
1	15-035-20833 /	330 Circle 360 Circle FEL EW	OIL	TA
2	15-035-20834 /	990 FSL/FND 3630 FEL/FW)	TA
3	15-035-20835	1650 FSLIKN 360 FELVEN	OII.	TA
			L	
		FSL/FNL FEL/FW		
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		FSL/FNL FEL/FW	L	
		FSL/FNL FEL/FW	L	
		FSL/FNL FEL/FW	L	
		FSL/FNL FEL/FW	L	

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.