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

DOR 107395

RECEIVED
OCT 22 2001
KCC WICHITA

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Check Applicable Boxes:

[ ] Oil Lease: No. of Wells 1 **

[,] 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 STOKERVILLE

Effective Date of Transfer 08/01/01

Lease Name MATTINGLY

__-__-__-__ Sec 13 T 34 R 06 (W)/E

Legal Description of Lease: NW/4

County HARPER

Production Zone(s) KC

Injection Zone(s) KCC WICHITA

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

_____ Feet from N/S Line of Section
_____ Feet from E/W Line of Section 5

Identify: Emergency Pit ☐ Burn Pit ☐ Storage Pit ☐ Drill Pit ☐

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Past Operator's License No. 4058

Past Operator's Name and Address:
American Warrior Inc,
Box 399 - G.C, Ks. 67846

Title Pres.

Contact Person: Cecil O'Brate

Phone: 316-275-9231

Date 8-1-01

Signature Cecil O'Brate

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New Operator's License No. 32753

New Operator's Name and Address
SEED GROUP
P.O. BOX 771189
WICHITA, KANSAS 67277-1189

Title OWNER / PETROLEUM GEOLOGIST

Contact Person PAUL C. CARAGEANNIS

Phone 316-838-5870

Oil/Gas Purchaser CENTRAL KANSAS CRUDE

Date 07/26/01

Signature

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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

EP&R 6/27/02 JUL 08 2002 UIC 7/02

Form T1 7/94.

MUST BE FILED FOR ALL WELLS

SIDE 2
T1 7/94

SCANNED

*LEASE NAME Mattingly *LOCATION NW¼-12-34-6

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	10-12-72	~~660~~ 330 Circle FSL/FNL 990 Circle FEL/FWL	oil	
		____ 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.