

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form T-1
June 2000

Form must be Typed
Form must be Signed
All blanks must be Filled

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

DCR 202705 (3)
Check Applicable Boxes: 216939 (3-1) ✓
☐ Oil Lease: No. of Wells _____
☒ Gas Lease: No. of Wells 3 207966 (3-2)
** Side Two Must Be Completed.
☐ Saltwater Disposal Well - Docket No. _____
Spot Location: _____ feet from N / S Line
_____ feet from E / W Line
☐ Enhanced Recovery Project Docket No. _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **
Field Name: Hugoton & Panoma

Effective Date of Transfer: August 2, 2001
Lease Name: Masonic Home
_____-_____-_____ Sec. 36 Twp. 25S R. 36 ☐ E ☒ W
Legal Description of Lease: Sec. 36-T25S-R36W

County: Kearny
Production Zone(s): Chase & Council Grove
Injection Zone(s): none

Surface Pond Permit # _____
(API # 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

Past Operator's License No. 32824 ✓
Past Operator's Name & Address: Barrett Resources Corporation
P.O. Box 383 Lakin, KS 67860
Title: District Manager

Contact Person: Wayne King
Phone: 620-355-7838
Date: August 30, 2001
Signature: Wayne King

New Operator's License No. 32909 ✓
New Operator's Name & Address: Williams Production RMT Company
P.O. Box 383 Lakin, KS 67860
Title: Engineering Technician

Contact Person: Don K. Wilken
Phone: 620-355-7838
Oil / Gas Purchaser: Oneok
Date: August 30, 2001
Signature: Don K. Wilken
RECEIVED
SEP 13 2001
KCC WICHITA

Acknowledgment 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 acknowledgment 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

* Lease Name: Masonic Home

* Location: Sec. 36-T25S-R36W

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 lesser If a lease covers more than one section please indicate which section each well is located.