

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 209928

Check Applicable Boxes:

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

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

** 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 _____ **

Effective Date of Transfer 09-01-02

Lease Name Muir # 1-20

-NE-NE-NE Sec 20 T 31S R 9W W

Legal Description of Lease: _____

E/2NE/4, W/2NE/4 of Sec 20-31S-9W

County Harper

Production Zone(s) Mississippi Chat

Field Name Spivey Crabbs

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 ☐ **KB**

Past Operator's License No. 33013

Contact Person: Zeno Farris

Past Operator's Name and Address:
Gruy Petroleum Management Co.
P. O. Box 140907
Irving, Texas 75014-0907

Phone: (972) 401-3111

Date August 15, 2002

Title Manager Administration

Signature Zeno Farris

New Operator's License No. 4706

Contact Person Jon E. Messenger

New Operator's Name and Address

Phone 620-532-5400

Messenger Petroleum Inc
525 S. Main
Kingman, KS 67068

Oil/Gas Purchaser Aquilla

Date August 15, 2002

Title President

Signature Jon E. Messenger

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 SEP 11/1/2002 NOV 04 2002 11/02

Authorized Signature

Date 10/29/2002

Authorized Signature

MUST BE FILED FOR ALL WELLS

7/7/94

*LEASE NAME

Muir # 1-20

*LOCATION: Sec. 20-31S-9W

WELL NO.

API NO.
(YR DRLD/PRE '67)

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

TYPE OF WELL
(OIL/GAS
IND/WSW)

WELL STATUS
(PROD/TA'D
ABANDONED)

1-20

15-077-20535



330

circle
XXXX/FNL

450

circle
FEL/FNL

Gas

Prod.

FSL/FNL

FEL/FNL

FSL/FNL

FEL/FNL

FSL/FNL

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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