

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

SCANNED

Check Applicable Boxes:

105556

[4 Oil Lease: No. of Wells 2 **

[] 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 **

Effective Date of Transfer 10-1-00

Lease Name Jones

S-1/2-NE-1/4 Sec 8 T 16S R 1 WE

Legal Description of Lease:

S1/2 NE1/4 8-16S-1W

County Sedgewick

Production Zone(s) M-55

Field Name Injection Zone(s)

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 ☒

Past Operator's License No. 6121 Contact Person: FRANCIS MELLAND
EXP 6/95

Past Operator's Name and Address: Phone: 785-227-3684

Melland Drilling Co. Inc. Date 10-20-00

Title Oil Proc. Signature

New Operator's License No. 6819 Contact Person Jay Scott

New Operator's Name and Address: Phone 785-254-7828

Scotts Well Service Oil/Gas Purchaser NCR A

Box 132 Date 10-1-00

Rexburg KS 67446 Signature Jay Scott

Title Partner Signature

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 Authorized Signature Date Authorized Signature

MUST BE FILED FOR ALL WELLS

SIDE 2
T1 7/94

*LEASE NAME

James

*LOCATION: S 1/2 NE 1/4 Section 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/MSW)

WELL STATUS
(PROD/TA'D
ABANDONED)

15-169-00879

X2

NA

15-169-00058

X1

1650

Circle
FSL/FNL

2310

Circle
FEL/FWL

0.1

TA'D

2310

FSL/FNL

2310

FEL/FWL

0.1

TA'D

FSL/FNL

FEL/FWL

FSL/FNL

FEL/FWL

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FEL/FWL

SCANNED

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.