

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

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

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

Check Applicable Boxes:

- ☒ Oil Lease: No. of Oil Wells 2 \*\*  
☐ Gas Lease: No. of Gas Wells \_\_\_\_\_ \*\*  
☐ Gas Gathering System: \_\_\_\_\_  
☐ Saltwater Disposal Well - Permit No.: \_\_\_\_\_  
Spot Location: \_\_\_\_\_ feet from ☐ N / ☐ S Line  
\_\_\_\_\_ feet from ☐ E / ☐ W Line  
☐ Enhanced Recovery Project Permit No.: \_\_\_\_\_  
Entire Project: ☐ Yes ☐ No  
Number of Injection Wells \_\_\_\_\_ \*\*

Field Name: Schmeidler SE

**\*\* Side Two Must Be Completed.**

Effective Date of Transfer: 10-1-2005  
KS Dept of Revenue Lease No.: 112 442  
Lease Name: Schmidt  
Sec. 34 Twp. 12 R. 17 ☐ E ☒ W  
Legal Description of Lease: 20 acres in the NW/4  
34-12-17w  
County: Ellis  
Production Zone(s): Lansing-KC  
Injection Zone(s): \_\_\_\_\_

Surface Pit Permit No.: \_\_\_\_\_  
(API No. if Drill Pit, WO or Haul)

\_\_\_\_\_ feet from ☐ N / ☐ S Line of Section  
\_\_\_\_\_ feet from ☐ E / ☐ W Line of Section

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling

☐ Haul-Off ☐ Workover ☐ Drilling

Past Operator's License No. 6127 ✓  
Past Operator's Name & Address: TAURUS OIL CO  
Hays, Ks 67601 P.O. Box 981  
Title: owner

Contact Person: Jeff Koron  
Phone: 785.628.1727  
Date: 10-5-2005  
Signature: [Signature]

New Operator's License No. 32875 ✓  
New Operator's Name & Address: CWB Co  
40837 Bear Creek Road  
Springville, Ca 93265  
Title: Co-owner

Contact Person: C.W. Bowles  
Phone: 559. [REDACTED] 539-2505  
Oil / Gas Purchaser: NCRA  
Date: 10-05-2005  
Signature: CW Bowles

**Acknowledgment of Transfer:** The above request for transfer of injection authorization, surface pit 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 pit permit.

\_\_\_\_\_ is acknowledged as the  
new operator and may continue to inject fluids as authorized by  
Permit No.: \_\_\_\_\_ Recommended action: \_\_\_\_\_  
Date: \_\_\_\_\_

Authorized Signature

\_\_\_\_\_ is acknowledged as the  
new operator of the above named lease containing the surface pit  
permitted by No.: \_\_\_\_\_  
Date: \_\_\_\_\_

Authorized Signature

DISTRICT \_\_\_\_\_

EPR 10/21/2005

PRODUCTION OCT 24 2005

UIC 10124/05

Mail to: Past Operator \_\_\_\_\_

New Operator \_\_\_\_\_

District \_\_\_\_\_

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

100105\_Schmidt.pdf

**Must Be Filled For All Wells**

KDOR Lease No.: \_\_\_\_\_

\* Lease Name: Schmidt

\* Location: NW/4 34-12-17

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)
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[illegible]

*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.