

REQUEST FOR CHANGE OF OPERATOR **KANSAS CORPORATION COMMISSION** **FOR ALL WELLS**
TRANSFER OF INJECTION AUTHORIZATION **CONSERVATION DIVISION**
OR TRANSFER OF SURFACE POND PERMIT **130 S. Market - Room 2078**
***LEASE NAME** _____ ***LOCATION** _____ **WICHITA, KANSAS 67202 - 3802**

********* DCR 12 9978 *********

Effective Date of Transfer 11-1-00 Check Applicable Boxes:

Lease Name Anderson Oil Lease: No. of Wells 3

W.S.W Sec. 32 T. 16 S. R. 22 W(E) Gas Lease: No. of Wells 0

Legal Description of Lease: _____ Saltwater Disposal Well - Docket No. N/A

W2/SW/4 _____ Spot Location: _____ feet from N/S Line

County MIAMI _____ feet from E/W Line

Enhanced Recovery Project Docket No. N/A

Entire project: Yes/No _____

Production Zone(s) Squirrel _____ Number of injection wells 0

Injection Zone(s) N/A _____ Field Name Paola Shoestring

Surface Pond Permit # N/A _____ Feet from N/S Line of Section
 _____ Feet from E/W Line of Section

Identify: Emergency Pit Burn Pit Storage Pit

List API#s on all post-1967 wells transferred with lease: other side

Past Operator's License No. 7337 Contact Person: Ralph Mills

Past Operator's Name and Address: _____ Phone: 913-837-2702

Ralph Mills _____ Date 11-1-00

29736 Spring Valley Rd. _____
Louisburg KS 66053 _____
 Title _____ Signature Ralph Mills

New Operator's License No. 32272 Contact Person: Bob Eberhart

New Operator's Name and Address _____ Phone 913-837-2823

Captain's Oil Inc. _____ Oil/Gas Purchaser Plains
30805 Coldwater Rd. _____

Isberg KS 66053 Date 11-1-00

Title Gen. Mgr _____ Signature Bob Eberhart

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 _____
 as the new operator and may continue to _____ new operator of the above named lease containing
 inject fluids as authorized by Docket # _____ the surface pond permitted by # _____
 Recommended action _____

Date _____ | Date _____
 Authorized Signature _____ | Authorized Signature _____

RECEIVED
 FEB 26 2002
 KCC WICHITA

is acknowledged
 RECEIVED
 STATE CORPORATION COMMISSION

FEB 26 2001

CONSERVATION DIVISION
 Wichita, Kansas

4/23/02 APR 28 2002 UC 4/02

T1 7/94

*LEASE NAME Anderson *LOCATION MIAMI CTY

SCANNED

API NO.	FOOTAGE FROM SECTION LINE	TYPE OF WELL	WELL STATUS
WELL NO. (YR DRLD/PRE '67)	(i.e. FSL=Feet from South Line) INJ/WSW)	(OIL/GAS ABANDONED)	(PROD/TAD)

<u>1</u>	<u>15-121-2525</u>	<u>510 Circle</u> <u>325</u> FSL/FNL <u>510 Circle</u> <u>325</u> FEL/FWL	<u>OIL</u>	<u>Prod.</u>
<u>2</u>	<u>15-121-25762</u>	<u>165</u> FSL/FNL <u>915</u> FEL/FWL	<u>OIL</u>	<u>Prod.</u>
<u>3</u>	<u>15-121-26025</u>	<u>495</u> FSL/FNL <u>915</u> FEL/FWL	<u>OIL</u>	<u>Prod.</u>
_____	_____	_____ FSL/FNL _____ FEL/FWL		
_____	_____	_____ FSL/FNL _____ FEL/FWL		
_____	_____	_____ FSL/FNL _____ FEL/FWL		
_____	_____	_____ FSL/FNL _____ FEL/FWL		
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_____	_____	_____ 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.