## 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

1)()K 1317// RECEIVED			
Check Applicable Boxes:  NOV 0, 6 2001	Effective Date of Transfer: NOVEMBER 1, 2001		
A Oil Lease: No. of Wells	Lease Name: ALEXANDER		
Gas Lease: No. of Wells KCC WICHITA  ** Side Two Must Be Completed.			
Saltwater Disposal Well - Docket No	Legal Description of Lease:		
Spot Location: feet from N / S Line	SE/4 SE/4 SEC. 3-32S-15W		
feet from E / W Line	001 001		
Enhanced Recovery Project Docket No.			
Entire Project: Yes No	County: BARBER		
Number of Injection Wells***	Production Zone(s): MISSISSIPPIAN 4942-48		
Field Name: DONALD	Injection Zone(s):		
Surface Pond Permit #(API # If Drill Pit)	feet from N / S Line of Sectionfeet from E / W Line of Section		
Identify: Emergency Pit Burn Pit	Storage Pit Drill Pit		
Past Operator's License No. 5290	Contact Person: ORVIE HOWELL		
Past Operator's Name & Address: HINKLE OIL COMPANY	Phone: (316) 267-0231		
150 N. MAIN, STE. 1016, WICHITA, KS 67202	Date: NOVEMBER 1, 2001		
Title: GENERAL MANAGER	Signature / 10to About		
New Operator's License No. 3911	Contact Person: ROBIN L. AUSTIN		
New Operator's Name & Address: RAMA OPERATING CO. INC.	Phone: (620) 234-5191		
101 S. MAIN ST., STAFFORD, KS 67578	Oil / Gas Purchaser: NCRA		
	1/-/-01		
Title: SECRETARY-TREASURER	Date: Signature:		
Acknowledgment of Transfer: The above request for transfer of injection a noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership	ation Commission. This acknowledgment of transfer pertains to Kansas		
is acknowleged as the	is acknowleged as the		
new operator and may continue to inject fluids as authorized by	new operator of the above named lease containing the surface pond		
Docket # Recommended action:	permitted by #		
Date:	Date:		



## Must Be Filed For All Wells

* Lease Name:	ALEXANDER		* Location:	SE/4 SE/4 3-32S-15W	
Well No.	API No. Footage (YR DRLD/PRE '67) (i.e. FSL = 6		Section Line from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-007-22406	Circle 375 FSIVFNL	Circle 565 FELFWL	OIL	PROD
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL _		

A separate sheet may be attached if necessary

<sup>\*</sup> 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.