

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

DOR 131816

RECEIVED

Check Applicable Boxes:

☒ Oil Lease: No. of Wells 1 **NOV 06 2001**  
☐ Gas Lease: No. of Wells KCC WICHITA

\*\* Side Two Must Be Completed.

☐ Saltwater Disposal Well - Docket No. \_\_\_\_\_

Spot Location: \_\_\_\_\_ feet from N / S Line

\_\_\_\_\_ feet from E / W Line

☐ Enhanced Recovery Project Docket No. \_\_\_\_\_

Entire Project: ☐ Yes ☐ No

Number of Injection Wells \_\_\_\_\_

Field Name: TRAPP

Effective Date of Transfer: NOVEMBER 1, 2001

Lease Name: SCHREIBER "B"

\_\_\_\_\_ Sec. 25 Twp. 15S R. 13 ☐ E ☒ W

Legal Description of Lease: \_\_\_\_\_

S/2 SE/4 SEC. 25-15S-13W

County: RUSSELL

Production Zone(s): LKC

Injection Zone(s): \_\_\_\_\_

Surface Pond Permit # \_\_\_\_\_  
(API # 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

Past Operator's License No. 5290

Past Operator's Name & Address: HINKLE OIL COMPANY  
150 N. MAIN, STE. 1016, WICHITA, KS 67202

Title: GENERAL MANAGER

Contact Person: ORVIE HOWELL

Phone: (316) 267-0231

Date: NOVEMBER 1, 2001

Signature: Orvie Howell

New Operator's License No. 9390

New Operator's Name & Address: SCHREIBER OIL COMPANY  
502 MAPLE, HOISINGTON, KS 67544

Title: OWNER

Contact Person: MARY ANN SCHREIBER

Phone: (620) 653-2598

Oil / Gas Purchaser: NCRA

Date: NOVEMBER 1, 2001

Signature: Mary Ann Schreiber

**Acknowledgment 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 acknowledgment 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: \_\_\_\_\_

Date: \_\_\_\_\_

Authorized Signature  
3/12/02 MAR 13 2002 3/02

\_\_\_\_\_ is acknowledged as the  
new operator of the above named lease containing the surface pond  
permitted by # \_\_\_\_\_ .

Date: \_\_\_\_\_

Authorized Signature

**Must Be Filed For All Wells**

**SCANNED**

\* Lease Name: SCHREIBER "B"

\* Location: S/2 SE/4 SEC. 25-15S-13W

[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.