

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 134/07

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: LARRISON SOUTH

Effective Date of Transfer: NOVEMBER 1, 2001

Lease Name: SMITH

_____ Sec. 6 Twp. 30S R. 13 ☐ E ☒ W

Legal Description of Lease: S/2 NW/4; SW/4; SW/4 NE/4;

W/2 SE/4 SEC. 6-30S-13W

County: BARBER

Production Zone(s): VIOLA - SIMPSON

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. 3911

New Operator's Name & Address: RAMA OPERATING CO. INC.
101 S. MAIN ST., STAFFORD, KS 67578

Title: SECRETARY-TREASURER

Contact Person: ROBIN L. AUSTIN

Phone: (620) 234-5191

Oil / Gas Purchaser: NCRA

Date: 11-1-01

Signature: Robin L. Austin

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

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

Date: _____

Authorized Signature

3/12/02 MAR 13 2002 3/02

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

* Lease Name: SMITH * Location: S/2 NW/4; SW/4; SW/4 NE/4; W/2 SE/4
SEC. 6-30S-13W

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.