[illegible] Mueller I .pdf

REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION AUTHORIZATION
OR TRANSFER OF SURFACE POND PERMIT

KANSAS CORPORATION COMMISSION
CONSERVATION DIVISION
130 S MARKET, ROOM 2078
WICHITA, KANSAS 67202

DCR 1066630

RECEIVED
JAN 0 9 2004
KCC WICHITA

Check Applicable Boxes:

Effective Date of Transfer 11-1-03

[✓] Oil Lease: No. of Wells 1 **

Lease Name Mueller - #I

[ ] Gas Lease: No. of Wells ____ **

** SIDE TWO MUST BE COMPLETED **

__-__-__-__ Sec 19 T 24 R 4 [✓ W] E

Legal Description of Lease: CE/2 W/2 NW

[ ] Saltwater Disposal Well - Docket No. ____
Spot Location: ____ feet from N/S Line
____ feet from E/W Line

County Reno

[ ] Enhanced Recovery Proj. Docket No ____
Entire project: Yes/No
Number of injection wells ____ **

Production Zone(s) Mississippi

Field Name S. Burrton

Injection Zone(s) ____

Surface Pond Permit # ____ (API No. 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. 5808

Contact Person: Beryl Grow

Past Operator's Name and Address:
W.R. Allam
P.O. Box 2325
Hutchinson, Ks. 67504

Phone: 620-663-6600

Date ____

Title ____

Signature Beryl Grow

New Operator's License No. 33324

Contact Person Beryl Grow

New Operator's Name and Address
Allam Production Inc.
P.O. Box 2325
Hutchinson, Ks. 67504

Phone 620-663-6600

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Oil/Gas Purchaser ____

Date 11-1-03

Title President

Signature W.R. Allam

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 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

Form TI 7/9

2/20/04 FEB 2 3 2004 2/20/04

Side Two

Must Be Filed For All Wells

* Lease Name: Mueller # I

* Location: CE2 - W2 - NW

Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line) Circle	Circle	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-155-03021 ✓ -00-00	4016 [✓ FSL]/FNL	4407 [✓ FEL]/FWL	Oil	TA
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		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		
		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.