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KANSAS CORPORATION COMMISSION

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

CONSERVATION DIVISION WICHITA, KS Check Applicable Boxes: Effective Date of Transfer: December 1. 2002 Oil Lease: No. of Wells\_ Lease Name: Amoco Mull #3-28 Gas Lease: No. of Wells \_\_ NE SE NE Sec. 28 Twp. 29S R. 33 Side Two Must Be Completed. Legal Description of Lease: SE/4 NE/4 Sec. 28, T29S-R33W Saltwater Disposal Well - Docket No. \_ Spot Location: \_\_\_\_ \_\_\_\_\_ feet from N / S Line \_\_ feet from E / W Line Enhanced Recovery Project Docket No. \_\_\_ County: Haskell Entire Project: Yes No Production Zone(s): Morrow/Atoka/Ft. Scott/Pawnee/KC "B" Number of Injection Wells .... Field Name: Lemon NE Injection Zone(s):\_ 15-081-20929-0000 A S S \_\_\_ feet from N /(S) ine of Section feet from E) W Line of Section Bum Pit Emergency Pit Identify: Storage Pit 9953 Exp. 10 30/02 **Bud Harris** Past Operator's License No. \_ Contact Person: Past Operator's Name & Address: Harris 011 and Gas Co. 1125 17th St., #2290, Denver, CO 80202 President Signature: 8061 John S. Weir New Operator's License No. .. Contact Person: P.O. Box 8647 316-681-0231 New Operator's Name & Address:\_ Wichita, Ks. 67208 Oil / Gas Purchaser: NCRA 11/25/02 OIL PRODUCERS I INC. OF KANDAS President Title: Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pond permit # \_\_ 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 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 \_\_\_\_\_. Recommended action:\_ permitted by # \_\_\_\_\_

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

Authorized Signature

Authorized Signature

## Must Be Filed For All Wells

County

| Lease Name:       | Amoco Mull                            |   | * Location: NE      | SE NE Sec 28,                     | T29S-R33W, Haskell                       |
|-------------------|---------------------------------------|---|---------------------|-----------------------------------|--|
| Well No.          | API No.<br>(YR DRLD/PRE '67)          | Footage from Section Line (i.e. FSL = Feet from South Line) |                     | Type of Well<br>(Oil/Gas/INJ/WSW) | Kansas Well Status (PROD/TA'D/Abandoned) |
| 3-28              | 000<br>15-081-20929- <del>000</del> 0 | Circle<br>3450 FSL FNL 5                                    | Circle<br>FEL FWL _ | 0i1                               | Producing                                |
| <del></del>       | A11                                   | FSL/FNL   | FEL/FWL             |                                   |  |
|                   |                                       | FSL/FNL _   | FEL/FWL _           |                                   |  |
|                   |                                       | FSL/FNL _   | FEL/FWL _           | , <u></u>                         |  |
|                   |                                       | FSL/FNL   | FEL/FWL _           |                                   |  |
|                   |                                       |   |                     |                                   |  |
|                   |                                       | FSL/FNL _   | FEL/FWL _           |                                   | <u> </u>                                 |
|                   |                                       | FSL/FNL   | FEL/FWL _           |                                   |  |
| <del></del>       |                                       | FSL/FNL _   | FEL/FWL _           |                                   |  |
|                   |                                       | FSL/FNL   | FEL/FWL _           |                                   |  |
|                   | - 10 H                                | FSL/FNL   | FEL/FWL _           |                                   |  |
|                   |                                       | FSL/FNL _   | FEL/FWL _           |                                   |  |
|                   |                                       | FSL/FNL _   | FEL/FWL _           |                                   |  |
|                   |                                       |   |                     |                                   |  |
|                   |                                       |   |                     |                                   |  |
|                   |                                       |   |                     |                                   |  |
|                   |                                       | FSL/FNL _   |                     |                                   |  |
|                   |                                       | FSL/FNL _   | FEL/FWL _           |                                   |  |
|                   | ·                                     | FSL/FNL _   | FEL/FWL _           |                                   |  |
|                   |                                       |   |                     |                                   | RECEIVED COMPOSTION                      |
|                   |                                       | FSL/FNL _   |                     |                                   |  |
| · · · · · · · · · |                                       | FSL/FNL _   |                     |                                   | NOV 27 2002                              |
|                   |                                       |   | FEL/FWL             | Çı                                | NDIBIVIQ NÖITAVABBNC<br>WICHITA, KS      |

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.