

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 110761

Check Applicable Boxes:

☒ Oil Lease: No. of Wells 2 **☐ Gas Lease: No. of Wells 12120

** 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: KrankenbergsEffective Date of Transfer: 12/1/02Lease Name: Krankenbergs "B"_____ Sec. 9 Twp. 24 R. 23 ☐ E ☒ WLegal Description of Lease: NE/4County: HodgemanProduction Zone(s): Mississippi

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 KBPast Operator's License No. 5663Past Operator's Name & Address: Hess Oil CompanyP. O. Box 1009, McPherson, KS 67460Title: ManagerContact Person: Bryan HessPhone: 620-241-4640Date: 12/17/02Signature: Bryan HessNew Operator's License No. 31627New Operator's Name & Address: WHITETAIL CRUDE, INCP O Box 544Ness City, KS 67560-0544Title: Mike J. Fritzler, PresidentContact Person: Mike J. Fritzler, PresidentPhone: 785-798-3641Oil / Gas Purchaser: NCRADate: 1/17/03Signature: Mike J. Fritzler

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

* Lease Name: Krankenbergr "B" * Location: NE/4 9-24-23W

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.