

JAN - 3 2002

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

CONSERVATION DIVISION
Wichita, Kansas

Check Applicable Boxes:

☐ Oil Lease: No. of Wells _____ **

☒ Gas Lease: No. of Wells 1 **

** 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: _____

Effective Date of Transfer: 12/13/01

Lease Name: MAAS

W/2 - NW - SW Sec. 9 Twp. 27S R. 12 ☐ E ☒ W

Legal Description of Lease: W/2 NW SW

County: Pratt

Production 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

Past Operator's License No. 30560

Past Operator's Name & Address: Crockett Oil & Gas, Inc.

Contact Person: Randy Crockett

Phone: 620-294-5206

202 N. Main Sharon, KS 67138

Date: 12-26-01

Title: President

Signature: Randy W. Crockett

New Operator's License No. 32900

New Operator's Name & Address: Hammerstone

Contact Person: Gary R. Shafter

Phone: (316) 288-3911

Mining Company, 1148 Armstrong

Oil / Gas Purchaser: Oncok, Tulsa, OK.

ct., Derby, KS 67037

Date: 1/3/02

Title: _____

Signature: G. R. Shafter

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

4/30/02 MAY 01 2002 5/02

Must Be Filed For All Wells

* Lease Name: MAAS * Location: W/2 NW SW, Sec. 9, 27S 12W
Pratt Co. KS.

[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.