

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form T-1
April 2004
Form must be Typed
Form must be Signed
All blanks must be Filled

Check Applicable Boxes:

☒ Oil Lease: No. of Oil Wells 2 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☐ Saltwater Disposal Well - Permit No.: _____
Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **
Field Name: Dreiling SE

**** Side Two Must Be Completed.**

Effective Date of Transfer: June 1, 1991
KS Dept of Revenue Lease No.: 125170
Lease Name: Schrant UA
_____ Sec. 27 Twp. 14 R. 16 ☐ E ☒ W
Legal Description of Lease: N/2 NE/4 and N/2 S/2 NE/4
County: Ellis
Production Zone(s): Arbuckle
Injection Zone(s): _____

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul) _____ feet from ☐ N / ☐ S Line of Section
_____ feet from ☐ E / ☐ W Line of Section
Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ Drilling ^{OR}

Past Operator's License No. 03756 Exp. 4/30/92
Past Operator's Name & Address: M. A. Yost
P. O. Box 811, Russell, KS 67665
Title: Operator

Contact Person: Marcia Blundon
Phone: 785-483-6455
Date: 3-2-2010

Signature: Marcia Blundon

New Operator's License No. 30737 ✓
New Operator's Name & Address: M. A. Yost Operations, Inc.
P. O. Box 811, Russell, KS 67665
Title: President

Contact Person: Marcia Blundon
Phone: 785-483-6455
Oil / Gas Purchaser: NCRA
Date: 3-2-2010
Signature: Marcia Blundon

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit 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 pit permit.

_____ is acknowledged as the
new operator and may continue to inject fluids as authorized by
Permit No.: _____. Recommended action: _____
Date: _____

Authorized Signature

_____ is acknowledged as the
new operator of the above named lease containing the surface pit
permitted by No.: _____.
Date: _____

Authorized Signature

DISTRICT _____ EPR 3-4-10

PRODUCTION 3/8/10

UIC 3-4-10

Mail to: Past Operator _____

New Operator _____

District _____

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

060191_Schrant.pdf

* Location: N/2 NE/4 and N/2 S/2 NE/4, 27-14-16W, Ellis Co.

* 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.