092602 _ medsker- INJ.pdf

KANSAS COPORATION COMMISSION OIL & GAS CONSERVATION DIVISION	
REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE POND PERMI	T

.

Form T-1 June 2000 Form must be Typed Form must be Signed All blanks must be Filled

Charle Applicable Reveau	Effective Date of Transferry 0.26,2002			
Check Applicable Boxes: $\mathcal{W} \cdot \mathcal{B} \cdot \mathcal{B}$	Effective Date of Transfer: <u>9-26-2002</u>			
\square OII Lease. No. of weaks $2 \frac{1}{2}$				
Gas Lease: No. of Wells <u>1</u> ** **Side Two Must Be Completed.	E/2-SW/4-NE/4- & - W/2-SE/4 Sec. 3 Twp. 33S R. 15 XE W			
Side Two must be completed.	Legal Description of Lease: <u>SW/4 SE/4; SE/4 SW/4, EXCEPT RR</u>			
Saltwater Disposal Well – Docket No. <u>D-21,567</u> $keese$ #1	R/W; AND ALL THAT PART OF SW/4 NE/4 AND NW/4 SE/4 AND			
Spot Location <u>130</u> feet from $\square N / \boxtimes S$ Line $\bigcirc \bigcirc \bigcirc$	NE/4 SW/4 LYING SOUTH AND EAST OF RR	<u>R/W</u>		
Enhanced Recover Project Docket No.				
	County: <u>MONTGOMERY</u>			
Entire Project: Yes No Number of Injection Wells <u>1</u> **	Production Zone(s): <u>BARTLESVILLE</u>	RECEIVED		
Field Name: JEFFERSON-SYCAMORE	Injection Zone(s): <u>ARBUCKLE</u>			
Their Marine. <u>JETTERSON-STEAMORE</u>		JUL 222004		
Surface Pond Permit #	feet from □N / □S Line of Section	KCC WICHITA		
(API # If Drill Pit)		_		
	feet from E / W Line of Section	4BR		
Identify:	Storage Pit Drill Pit			
1.200 -				
Past Operator's License No. <u>6329</u>	Contact Person: WAYNE E. BRIGHT			
Past Operator's Name & Address: WAYNE E. BRIGHT	Phone: <u>620-331-6187</u>	RECEIVED		
RT. 3, BOX 461, INDEPENDENCE, KS 67301	Date:			
Title: OWNER AND OPERATOR	Signature: <u>////////////////////////////////////</u>	<u>SEP_2_3_2004</u>		
		KCC MICHT		
New Operator's License No. 33074	Contact Person: <u>Rudolph J.</u>			
New Operator's Name & Address: <u>Dart Cherokee Basin Operating</u>	Schweizer			
Company, LLC	Phone: 517-676-2900 / /	' N		
	Oil/Gas Purchaser, Cherower Basin Pipeli	//		
Mason MI 48854-0177	Date: July 7, 2003	~		
	Signature: Puckuft // Wh			
Title: <u>Vice President</u>				
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 Corporatio				
Corporation Commission records only and does not convey any owr	_	•		
$\sum Q = Q = Q $				
Daet Cherokee BasiN Operatin is acknowledged as	3	is		
the new operator and may continue to inject fluids as authorized by	acknowledged as the new operator of the a	bove named lease		
Docket # <u>021567</u> . Recommended	containing the surface pond permitted by:			
action: Now	#			
Date: 11-1-10	 Date:			
Authorized Signature		d Signature		
Autonzeu Signature	Aunonzei	a Signature		
Mail to: KCC - Conservation Division, 130	S. Market – Room 2078, Wichita, Kansas 67202			

Side Two

Must Be Filed For All Wells

*Lease Name:	MEDSKER		*Location:	3-33S-15E MONTO	GOMERY CO., KS
Well No.		Footage from (I.e. FSL = Feet fr			Well Status (PROD/TA'D/Abandoned)
Surfacett	15-125-25,540	Circle	Circle 1,405 FEL/FWL	SWD	TA'D
	15-125-26,258	1,200 FSL/FNL	2,590 FEL/FWL	OIL	TA'D
+ PC	15-125-28,383	- 23-04 		OIL	TAD
Surface #4	15-125-28,341	3,300 FSL/FNL	1,650 FED FWL	GAS	
		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		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		RECEIVED
		FSL/FNL	FEL/FWL		

A separate sheet may be attached if necessary

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*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.