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

KANSAS CORPORATION COMMISSION
CONSERVATION DIVISION
130 S MARKET, ROOM 2078
WICHITA, KANSAS 67202

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Check Applicable Boxes:

1-1-00 Effective Date of Transfer

[X] Oil Lease: No. of Wells 2 **

Lease Name PONCE

[ ] Gas Lease: No. of Wells _____ **

__-__-N/2-NE/4 Sec 28 T 21 R 7 (W)/E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: 660 FNL

[ ] Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N/S Line 660 FEL 990 FNL 990 FWL

_____ feet from E/W Line

[ ] Enhanced Recovery Proj. Docket No _____

County RICE

Entire project: Yes/No

Number of injection wells _____ **

Production Zone(s) MISS. 3372

Field Name WHERRY

Injection Zone(s) _____

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Surface Pond Permit # _____ (API No. 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 ☐

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Past Operator's License No. 9137

Contact Person: DONNA LACKEY

Past Operator's Name and Address:
MILTON LACKEY
382 1st AVE.
INMAN KS. 67546

Phone: 316-585-2119

Signature Date Donna Lackey

Title OWNER OPERATOR

Date Signature 5-10-00

****

New Operator's License No. 32599

Contact Person JOE MAES

New Operator's Name and Address
M & M OIL & GAS
BOX 41
CHASE KS. 67524

Phone 316-727-3410

Oil/Gas Purchaser EQUIVA TRADING

Date 5-7-00

Title OWNER OPERATOR

Signature Joe Maes

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ACKNOWLEDGEMENT 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 acknowledgement 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

RECEIVED
STATE CORPORATION COMMISSION
MAY 12 2000
CONSERVATION DIVISION
Wichita, Kansas

Form T1 7/94

EP&R 6/23/2000 PROD 01 2000 7-27-00

MUST BE FILED FOR ALL WELLS **SIDE 2**

T1 7/94

*LEASE NAME Ponce *LOCATION 28-21S-7W

WELL NO.	API NO. (YR DRLD/PRE '67)	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)	TYPE OF WELL (OIL/GAS INJ/WSW)	WELL STATUS (PROD/TA'D ABANDONED)
#3	15-159-00315 7-20-56	~~660~~ 990 Circle FSL/FNL ~~660~~ 2970 Circle FEL/FWL		
#2	15-159-05496 9-25-57	990 330 FSL/FNL 990 2310 FEL/FWL		
		FSL/FNL FEL/FWL		
		FSL/FNL FEL/FWL		
		FSL/FNL FEL/FWL		
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		FSL/FNL FEL/FWL		

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.

#1 NW NE NE #2 NW NW NE