

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

Check Applicable Boxes:

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

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

** SIDE TWO MUST BE COMPLETED **

[] Saltwater Disposal Well - Docket No. _____
Spot Location: _____ feet from N/S Line
_____ feet from E/W Line

[] Enhanced Recovery Proj. Docket No. _____
Entire project: Yes/No
Number of injection wells _____ **

Field Name KINNEY

Surface Pond Permit # _____
(API No. If Drill Pit)

Identify: Emergency Pit ☐

Burn Pit ☐

Storage Pit ☐

Drill Pit ☐

Effective Date of Transfer 1-1-96

Lease Name HAMPTON

Sec 19 T 34S R 34W W/E

Legal Description of Lease: _____

County SEWARD

Production Zone(s) CHESTER

Injection Zone(s) _____

Feet from N/S Line of Section

Feet from E/W Line of Section

Past Operator's License No. 51821

Contact Person: Bonnie L Young

Past Operator's Name and Address:

Phone: 713-878-3954

SOUTH AND ROYALTY CO.
400 N. SAM HOUSTON PKWY #1200
HOUSTON, TX 77060

Date 1-4-96

Title _____

Signature Bonnie L Young

New Operator's License No. 8756

Contact Person BONNIE L YOUNG

New Operator's Name and Address:

Phone 713-878-3954

MERIDIAN OIL INC
400 N SAM HOUSTON PKWY #1200
HOUSTON, TX 77060

Oil/Gas Purchaser KOCH OIL CO.

Date 1-4-96

Title REGULATORY COMPLIANCE

Signature Bonnie L Young

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 _____

MUST BE FILED FOR ALL WELLS

*LEASE NAME HAMPTON

*LOCATION: _____

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)

1-19

175-20842

805 Circle
FSL/FNL 2125 Circle
FEL/FWL

oil

2-19

175-20853

1980 Circle
FSL/FNL 660 Circle
FEL/FWL

oil

FSL/FNL FEL/FWL

FSL/FNL FEL/FWL

FSL/FNL FEL/FWL

FSL/FNL FEL/FWL

FSL/FNL FEL/FWL

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FSL/FNL FEL/FWL

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.