

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:

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

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

Effective Date of Transfer 1/1/96

Lease Name PARKIN "F" #1

_____-_____-_____- Sec 32 T 29 R 18 W/4

Legal Description of Lease: SE SW SE

County KIOWA

Production Zone(s) LKC "A"

Field Name _____ Injection Zone(s) _____

Surface Pond Permit # _____ Feet from N/S Line of Section
(API No. If Drill Pit) _____ Feet from E/W Line of Section

Identify: Emergency Pit ☐ Burn Pit ☐ Storage Pit ☐ Drill Pit ☐ JR

Past Operator's License No. 31285 Contact Person: MITCHELL EHRLICH

Past Operator's Name and Address: _____ Phone: (806)435-6544

R.E.D. RESOURCES, INC.

P.O. BOX 1258

PERRYTON, TEXAS 79070

Title SECRETARY-TREASURER Signature Mitchell Ehrlich

New Operator's License No. 18426 Contact Person TREVOR M. LYONS

New Operator's Name and Address _____ Phone (918)587-2497

Lyons & Lyons, Inc.

P.O. BOX 14148
Wichita, OK 74159

Title President Signature Trevor M. Lyons

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 _____

_____ is acknowledged as the new operator of the above named lease containing the surface pond permitted by # _____

Date _____
Authorized Signature _____

Date _____
Authorized Signature _____

Form T1 7/94

PARKIN "F"

API NO.
(YR DRLD/PRE '67) *

*LOCATION: Sec 32 T 29 R 18W

**FOOTAGE FROM SECTION LINE
(i.e. FSL=Feet from South Line)**

WELL STATUS
(PROD/TA'D
ABANDONED)

[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.