

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 1-1-97

Lease Name Alexander Trust "A" #1

SE-NE--- Sec 28 T 32 R 32W W/E

Legal Description of Lease: _____

County Seward

Production Zone(s) Morrow/St. Louis

Field Name Fedder SW

Injection Zone(s) _____

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 ☐

Past Operator's License No. 5652

Contact Person: Stan Brady

Past Operator's Name and Address:

Mustang Oil & Gas Corporation
100 S. Main, Suite 300
Wichita, KS 67202

Phone: 316-267-8011

Date 6-4-97

Title Vice President

Signature Stan Brady

New Operator's License No. 6113

Contact Person Jeff Wood

New Operator's Name and Address

Landmark Energy Exploration, Inc.
1816 N. Rock Road, Suite 205
Wichita, KS 67206

Phone 316-683-8080

Oil/Gas Purchaser _____

Date 6/12/97

Title President

Signature [Signature]

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

MUST BE FILED FOR ALL WELLS

***LEASE NAME** Alexander Trust "A"

***LOCATION:** SE NE 28-32-32

WELL NO.	API NO.	(YR DRLD/PRE '67)
1	2	3
4	5	6
7	8	9
10	11	12
13	14	15
16	17	18
19	20	21
22	23	24
25	26	27
28	29	30
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364	365	366

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

[illegible][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.