

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:

Effective Date of Transfer 1-1-97

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

Lease Name Hanna #2

[x] Gas Lease: No. of Wells 1 **

- - C - SE Sec 29 T 31 R 43 W/E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: _____

[] Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N/S Line

All of Section 29

_____ feet from E/W Line

[] Enhanced Recovery Proj. Docket No. _____

County Morton

Entire project: Yes/No

Production Zone(s) Topeka

Number of injection wells _____ **

Field Name Greenwood

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. 9448

Contact Person: Eldon Dirks

Past Operator's Name and Address:

Phone: 316-356-4951

HiGar Petroleum Inc

Date 3-6-97

Drawer L

Signature Eldon L. Dirks

Elkart, KS 67950

Title Administrator

New Operator's License No. 9723

Contact Person Gary D. Hancock

New Operator's Name and Address

Phone 316-624-4744

DoMar Oil & Gas, Inc.

Oil/Gas Purchaser Aurora

P.O. Box 238

Date 3-6-97

Liberal, KS 67905-0238

Signature Gary D. Hancock

Title President

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 # _____.
RECEIVED
KANSAS CORP COM
MAR 10 P 11:36

Date _____
Authorized Signature _____

Date _____
Authorized Signature _____

***LOCATION:**

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

TYPE OF WELL
(OIL/GAS
INJ/MSW)

WELL STATUS
(PROD/TA'D
ABANDONED)

Circle
FEL/FWI

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

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FEL/FWL

FEL/FWL

FEL/FWL

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.