

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 1-1-98

Lease Name Davis Ranch 1-6

C -S/2- NE - Sec 6 T 35S R 14 (W/E)

Legal Description of Lease: _____

NE/4 Sec. 6-35S-14W

County Barber

Production Zone(s) Mississippi

Field Name Aetna

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. 6769

Contact Person: Gordon Penny

Past Operator's Name and Address:

Westmore Drilling Co., Inc.

1614 Cypress Point Drive

Lawrence, KS 66047

Phone: 785-749-3712

Date 3-5-98

Signature [Signature]

Contact Person Michael Farrar

Title President

New Operator's License No. 31938

New Operator's Name and Address

Indian Oil Co., Inc.

P.O. Box 209

Medicine Lodge, KS 67104

Phone 316-886-3763

American Transportation/

Oil/Gas Purchaser Kansas Gas Supply

Date 3-3-98

Signature [Signature]

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 # _____

Date _____

Authorized Signature

Date _____

Authorized Signature

Form T1 7/9

MUST BE FILED FOR ALL WELLS

21 7/9

*LEASE NAME

Davis Ranch 1-6

*LOCATION: Sec. 6-35S-14W

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/MSW)

WELL STATUS
(PROD/TA'D
ABANDONED)

1-6

15-007-30052

1980

Circle FSL/FNL 1320 Circle FEL/FWL

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 transfer a unit which consists of more than one lease please file a separate side two for each lease. If a well covers more than one section please indicate which section each well is located.