

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

January 3, 2000

Check Applicable Boxes:

Effective Date of Transfer

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

Lease Name THEIS "C" #1

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

- - C -E/2 Sec 7 T 34 R 25 W/B

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: _____

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

E/2 Sec. 6 & E/2 Sec. 7-34S-25W

_____ feet from E/W Line

[] Enhanced Recovery Proj. Docket No _____

County Clark

Entire project: Yes/No

Number of injection wells _____ **

Production Zone(s) Morrow/Mississippi

Field Name McKinney

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. 5134

Contact Person: Jack L. Yinger

Past Operator's Name and Address:

Phone: 316-264-8394

GRAHAM-MICHAELIS CORPORATION

Date January 3, 2000

P.O.Box 247

Wichita, KS 67201

Title Vice President

Signature *Jack L. Yinger*

New Operator's License No. 5363

Contact Person Charles Spradlin

New Operator's Name and Address

Phone 316-265-3311

BEREXCO, INC.

Oil/Gas Purchaser

100 N. Broadway, Suite 970

Date January 3, 2000

Wichita, KS 67201

Title Executive Vice President

Signature *Charles Spradlin*

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

SIDE 2

T1 7/94

*LEASE NAME THEIS "C"

*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	15-025-1008900 ✓	Section 7 2640' <u>Circle FSL/FNL</u> 1320' <u>Circle FEL/FWL</u>	Gas	Producing
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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.