

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:

RECEIVED
STATE CORPORATION COMMISSION Effective Date of Transfer 2-1-92

[X] Oil Lease: No. of Wells 2 FEB 11 2000

[] Gas Lease: No. of Wells **
** SIDE TWO MUST BE COMPLETED ** CONSERVATION DIVISION
Wichita Kansas

[X] Saltwater Disposal Well - Docket No. D 04865
Spot Location: 2310 feet from X/S Line
2310 feet from P/W Line

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

Lease Name Franklin

SE NE SW
NE - NE - SW Sec 5 T 34S R 23 E
NE SE SW W/4

Legal Description of Lease: Sw/4

County Cowley

Production Zone(s) Bartlesville

Field Name Unknown

Injection Zone(s) Stalnaker

Surface Pond Permit # _____
(API No. If Drill Pit)

1750 Feet from S Line of Section
2410 Feet from W Line of Section

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

Pit application received by Kathy H. 4/13/00 from Don Jenkins.

Past Operator's License No. 7322

Contact Person: Paul Walker

Past Operator's Name and Address:

Phone: 316-447-3389

A.M.J. Company

Date 2-1-92

401 North Summit

Arkansas City, Ks 67005

Partner

Signature Paul Walker

New Operator's License No. 30046

Contact Person Don Jenkins

New Operator's Name and Address

Phone 316-442-6334

Don Jenkins

1602 23rd St

Arkansas City, Kansas 67005

Oil/Gas Purchaser Diamond Shamrock

Date 2-1-92

Title Owner

Signature Don Jenkins

ACKNOWLEDGEMENT OF TRANSFER: The above request for transfer of injection authorization, surface pond permit # _____ has been noted, approved and duly recorded in the record 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.

DON JENKINS is acknowledged as the new operator and may continue to inject fluids as authorized by Docket # D 04865. Recommended action _____

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

Date 6-9-00 Mike Engelbrecht
Authorized Signature

Date _____
Authorized Signature

EP&R 4/17/2000 PROD UIC 5-9-00

MUST BE FILED FOR ALL WELLS

SIDE 2

*LEASE NAME	Culver	*LOCATION: 9-31S-8W			
WELL NO	API NO (YR DRLD/PRE'67)	FOOTAGE FROM SEC. LINE (i.e. FSL= feet from south line)		TYPE OF WELL	WELLSTATUS (Oil/Gas Inj/WSW) (Prod/TAD Abandoned)
	✓ 100	Circle FSL/FNL	Circle FSL/FWL		
#1	10-21-64 15-077-30000	1320	1320	Oil/Gas	Producing
#2	D-11722	990	990	SWD	
#3	2-15-65 15-077-30002	1980	660	Gas	Producing
#4-9	15-077-21,218 -	1180	2270	Gas	Producing
#5-9	15-077-21,321 ✓	330	1650	Oil/Gas	Producing

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.