

REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION AUTHORIZATION
OR TRANSFER OF SURFACE POND PERMIT

STATE CORPORATION COMMISSION
CONSERVATION DIVISION
200 COLORADO DERBY BLDG.
WICHITA, KS 67202

Effective Date of Transfer 2-1-96

Check Applicable Boxes:

Lease Name COLLINGWOOD

[] Oil Lease: No. of Wells _____

1 Sec. T 29 S R 19 (W/E

[X] Gas Lease: No. of Wells 1

Legal Description of Lease: _____

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

C NW SW

County KIOWA

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

Production Zone(s) _____

Injection Zone(s) _____

Field Name UNKNOWN

Surface Pond Permit # _____

_____ Feet from N/S Line of Section
_____ Feet from E/W Line of Section

Identify: Emergency Pit ☐

Burn Pit ☐

Storage Pit ☐

List API#'s on all post-1967 wells transferred with lease: _____

Past Operator's License No. 05152

Contact Person: Lee Banks

Past Operator's Name and Address:

Phone: 316-267-0783

Lee Banks d/b/a Banks Oil Co.

Date 3/27/96

200 W. Douglas, Suite 550

Signature Brian Sirok

Wichita, Ks 67202

Title owner

New Operator's License No. 3959 ✓

Contact Person BRIAN SIROKY

New Operator's Name and Address

Phone 316-672-5713

SIROKY OIL MANAGEMENT

Oil/Gas Purchaser WESTERN RESOURCES

P O Box 464

Date 3-20-96

PRATT KS 67124

Title PRESIDENT

Signature Brian Sirok

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 _____

Date _____

Authorized Signature

Authorized Signature

Form T1 10/91