

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 2-13-98

[ ] Oil Lease: No. of Wells \_\_\_\_\_ \*\*

Lease Name Leppert Unit

[x] Gas Lease: No. of Wells 4 \*\*

All - - - - - Sec 19 T 16 S R17 (W/E)

\*\* SIDE TWO MUST BE COMPLETED \*\*

Legal Description of Lease: \_\_\_\_\_

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

All of Sec. 19 - 16 S - 17 W

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

County Rush

Production Zone(s) Chase, L-KC, & Topeka

Field Name \_\_\_\_\_

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. 03456

Contact Person: Terry W. Piesker

Past Operator's Name and Address:

Phone: (785) 625-6374

AFG Energy Inc.

Date 2-13-98

P.O. Box 458

Hays, Ks. 67601-0458

Title Production Manager

Signature Terry W. Piesker

\*\*\*\*\*

New Operator's License No. 32278

Contact Person Terry W. Piesker

New Operator's Name and Address

Phone (785) 625-6374

Tengasco, Inc.

Oil/Gas Purchaser KN Energy

P.O. Box 458

Hays, Ks. 67601-0458

Date 2-13-98

Title Production Manager

Signature Terry W. Piesker

\*\*\*\*\*

**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

FR

\*LEASE NAME Lippert

\*LOCATION: All Sec. 19 - 16 S - 17 W

[illegible]

\*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.