

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 2/17/99
Lease Name RALL
_____-_____-_____- Sec 26 T 31 R 09 W/E
Legal Description of Lease: _____
_____ C E/2 SW SW
County HARPER
Production Zone(s) MISS
Injection Zone(s) _____

Field Name SPIVEY GRABS

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. 30602 Contact Person: JOHN M KELLEY

Past Operator's Name and Address:
JOHN M KELLEY
200 EAST FIRST, STE 301
WICHITA KS 67202-2194
Phone: (316) 262-3413 (316) 721-2401
Date 2/17/99

Title OWNER/OPERATOR Signature [Signature]

New Operator's License No. 32433 Contact Person JOHN M KELLEY

New Operator's Name and Address
ONSHORE, L.L.C.
200 EAST FIRST, STE 301
WICHITA KS 67202-2194
Phone (316) 262-3413 (316) 721-2401
JN EXPLORATION & PRODUCTION
Oil/Gas Purchaser COLT RESOURCES CORP: EOTT
Date 2/17/99

Title OWNER/OPERATOR/MANAGER Signature [Signature]

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 _____

Date _____
Authorized Signature _____

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

Date _____
Authorized Signature _____
RECEIVED
FEB 19 1999
CONSERVATION DIVISION
Wichita, Kansas
Form T1 7/54

MUST BE FILED FOR ALL WELLS

SIDE 2
T1 7/94

*LEASE NAME _____ RALL _____

*LOCATION: _____ HARPER CO KS _____

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 _____
C E/2 SW SW 26-31-9W

660' _____
Circle 990
FSL/FNL ~~FEL/FWL~~

GAS _____
PRODUCING _____

_____ 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 _____

_____ FSL/FNL _____ FEL/FWL _____

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