

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

STATE CORPORATION COMMISSION
CONSERVATION DIVISION
130 S. MARKET, ROOM 2078
WICHITA, KS. 67202
Effective Date of Transfer March 1, 1998

Check Applicable Boxes:

☒ Oil Lease: No. of Wells 1 **

Lease Name Campbell

☐ Gas Lease: No. of Wells **

 NE NE NW Sec 33 T 29 R 7 W/E

SIDE TWO MUST BE COMPLETED

☐ Saltwater Disposal Well - Docket No.

Legal Description of Lease: N/2 NW/4

Spot Location feet from N/S Line

 feet from E/W Line

☐ Enhanced Recovery Project Docket No.

County Kingman

Entire Project: Yes/No

Number of injection wells **

Production Zone(s) Mississippian

Field Name Spivey-Grabbs

Injection Zone(s)

Surface Pond Permit #

 Feet from N/S Line of Section

 Feet from E/W Line of Section

Identify: Emergency Pit ☐ Burn Pit ☐

Storage Pit ☐

Past Operator's License No. 31532 *6581*

Contact Person: Steven C. Anderson

Past Operator's Name and Address:

Phone 316-636-1801

Bison Production Company

Date April 2, 1998

f/k/a Bison Energy Corporation

9320 E. Central

Wichita, KS 67206

Title Vice President

Signature *[Signature]*

New Operator's License No. 31191

Contact Person: Randy Newberry

New Operator's Name and Address

Phone 316-254-7972 *7251*

R & B Oil & Gas, Inc.

PO Box 422195

Attica, KS 67206

Oil/Gas Purchaser *Amer. Trans. & Marketing*
~~Koch Oil Company~~

Date April 2, 1998

Title President

Signature *Randy Newberry*

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. 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 #

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

Date _____

Authorized Signature

Date _____

Authorized Signature

MUST BE FILED FOR ALL WELLS

SIDE 2

*LEASE NAME	Campbell	*LOCATION:	N/2 NW/4 33-29S-7W	
WELL NO	API NO	FOOTAGE FROM SEC. LINE	TYPE OF WELL	WELL STATUS
	(YR DRLLD/PRE'67)	(i.e. FSL= feet from south line)	(Oil/Gas Inj/WSW)	(Prod/TAD Abandoned)
#1	15-095-00831-0000 1958	Circle 300'	Circle 2970'	Producing
		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 each lease. If a lease covers more than one section please indicate which section each well is located.