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

KANSAS CORPORATION COMMISSION 2
CONSERVATION DIVISION
130 S. Market - Room 2078
WICHITA, KANSAS 67202

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Effective Date of Transfer 4-01-96

Check Applicable Boxes:

Lease Name Antrim "A"

[X] Oil Lease: No. of Wells 2

__-__-E/2 Sec. 17 T 21 S. R 22 W/E

[ ] Gas Lease: No. of Wells _____

Legal Description of Lease: East Half of Section 17-T21S-R22W

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

County Hodgeman

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

Production Zone(s) Miss/Ft.Scott

Injection Zone(s) _____

Field Name Wieland

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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: _____

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Past Operator's License No. 31845

Contact Person: Dave Gilkey

Past Operator's Name and Address:
EL-Kan Exploration
P.O. Box 105
Garfield, Kansas 67520-0105

Phone: 316/529-2410

Date May 07, 1996

Title Owner

Signature Dave Gilkey

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New Operator's License No. 4058

Contact Person Cecil O'Brate

New Operator's Name and Address
American Warrior, Inc.
P.O. Box 399
Garden City, Kansas 67846

Phone 316/275-9231

Oil/Gas Purchaser Texaco Trading & Trans.

RECEIVED
KANSAS CORPORATION COMMISSION
JUN 17 1996
CONSERVATION DIVISION
WICHITA, KS

Date May 07, 1996

Title President

Signature Cecil O'Brate

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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

Form T1 10/91

MUST BE FILED FOR ALL WELLS T1 7/94

*LEASE NAME Antrim "A" *LOCATION: 17-21S-22W

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	Drilled 1961	554	Circle FSL/(FNL)	766	Circle (FEL)/FWL	Oil	Prod.
2	Drilled 1961	554	FSL/(FNL)	766	FEL/(FWL)	Oil	Prod.
3	Drilled 1961	1864	FSL/(FNL)	766	(FEL)/FWL	Oil	P&A
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			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 each lease. If ease covers more than one section please indica which section each well is located.