

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:

[X] Oil Lease: No. of Wells 4 **

[] Gas Lease: No. of Wells _____ **

** 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 _____ **

Field Name Chase-Silicia

Effective Date of Transfer 4-1-96

Lease Name Galliant Lease

-S/2-SE- Sec 26 T20 R 12 W/E

Legal Description of Lease: _____

County Barton

Production Zone(s) Arbuckle Formation

Field Name Chase-Silicia

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. 5006

Contact Person: Craig Pangburn

Past Operator's Name and Address:

Phone: 316-793-5483

Rice Engineering Corporation

Date March 15, 1996

1020 Hoover

Great Bend, KS 67530

Title Field Manager

Signature Craig Pangburn

New Operator's License No. 31826

Contact Person Craig Pangburn

New Operator's Name and Address

Phone 316-793-3911

T&C Mfg. & Operating, Inc.

Oil/Gas Purchaser _____

Box 225

Date March 15, 1996

Great Bend, KS 67530

Title President/Geologist

Signature Craig Pangburn

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 _____

Galliar Lease

API NO.
(YR DRLD/PRE '67) *

*LOCATION: S/2 SE/4 Sec 26-T-20S-R-12W

Barton County, KS

FOOTAGE FROM SECTION LINE
(i.e. FSL=Feet from South Line)

WELL STATUS
(PROD/TA'D
ABANDONED)



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

