

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 1 **

☐ 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 HUMMEL

Effective Date of Transfer 6/1/95

Lease Name HUMMEL BB

_____ - _____ - _____ Sec 31 T 21S R 24W W/E

Legal Description of Lease: 80 AC

E/2 S/2 SW/4 SEC 31-21S-24W

County HODGEMAN

Production Zone(s) MISS.

Injection Zone(s) _____

Surface Pond Permit # _____ Feet from N/S Line of Section
(API No. If Drill Pit) _____ Feet from E/W Line of Section

Identify: Emergency Pit ☐ Burn Pit ☐ Storage Pit ☐ Drill Pit ☐ SLKZ

Past Operator's License No. 5229 Contact Person: J.F. Mitchell

Past Operator's Name and Address
Phillips Petroleum Company
P.O. Box 1967
Houston, Texas 77251-1967

Phone (713)669-3509

Date 10/2/95

Title Director, Regulatory Compliance

Signature Jacob Mitchell

New Operator's License No. 9312

Contact Person: Greg Copeland

New Operator's Name and Address
EQUINOX OIL COMPANY, INC.
10077 Grogans Mill Road, Suite 475
The Woodlands, Texas 77380

Phone 713/364-7037

Oil/Gas Purchaser _____

Date 10/2/95

Signature Stephen D. [Signature] CONSERVATION DIVISION

Title Executive Vice President

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 _____

*When transferring a unit which consists of more than one section please indicate which section each well is located. 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.