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

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Check Applicable Boxes:

Effective Date of Transfer 6/1/95

[X] Oil Lease: No. of Wells 3 **

Lease Name SIEFKES A

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

____ - ____ - ____ - ____ Sec 34 T 21S R 12W W/E

** SIDE TWO MUST BE COMPLETED **

[ ] Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N/S Line

_____ feet from E/W Line

Legal Description of Lease: 160 AC

NE/4 SEC 34-21S-12W

[ ] Enhanced Recovery Proj. Docket No _____

Entire project: ☐ Yes ☐ No

Number of injection wells _____ **

County STAFFORD

Production Zone(s) LKC, ARB

Field Name MAX

Injection Zone(s) _____

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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 ☐ SA

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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

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New Operator's License No. 9312

Contact Person: Greg Copeland

RECEIVED
KANSAS CORPORATION COMMISSION

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

Phone 713/364-7037

OCT 05 1995

Oil/Gas Purchaser _____

CONSERVATION DIVISION
WICHITA, KS

Date 10/6/95

Title Executive Vice President

Signature Stephen D Lynch

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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 7/94

P

MUST BE FILED FOR ALL WELLS

* LEASE NAME SIEFKES A

* LOCATION: NE/4 SEC 34-21S-12W

WELL NO.	API NO. (YR DRLD/PRE '67)	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)	Circle		Circle	TYPE OF WELL (OIL/GAS INJ/WSW)	WELL STATUS (PROD/TA'D ABANDONED)
3	1518513147	C N/2 NE NE	FSL/FNL		FEL/FWL	OIL	PROD
1	1518500307	SW NE NE	FSL/FNL		FEL/FWL	OIL	PROD
5	1518520960	280 FNL	FSL/FNL	1320 FEL	FEL/FWL	OIL	PROD
			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		
			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.