

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 3 **

☐ 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 HUNTER

Effective Date of Transfer 6/1/95

Lease Name TRESSIN A

_____ - _____ - _____ Sec 20 T 16S R 1W W/E

Legal Description of Lease: 160 AC

NE/4 SEC 20-16S-1W

County SALINE

Production Zone(s) DOUGLAS, 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 ☒ sf

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

Past Operator's Name and Address Phone (713)669-3509

Phillips Petroleum Company

Date 10/2/95

P.O. Box 1967

Houston, Texas 77251-1967

Title Director, Regulatory Compliance Signature Jacob Mitchell

New Operator's License No. 9312 Contact Person: Greg Copeland

New Operator's Name and Address Phone 713/364-7037

EQUINOX OIL COMPANY, INC.

Oil/Gas Purchaser _____

10077 Grogans Mill Road, Suite 475

Date 10/2/95

The Woodlands, Texas 77380

Title Executive Vice President Signature _____

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 _____

MUST BE FILED FOR ALL WELLS

* LEASE NAME TRESSIN A

* LOCATION: NE/4 SEC 20-16S-1W

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)
			Circle FSL/FNL	Circle FEL/FWL			
<u>2</u>	<u>1516900536</u>	<u>330 FSL</u>	<u>FSL/FNL</u>	<u>330 FWL</u>	<u>FEL/FWL</u>	<u>OIL</u>	<u>PROD</u>
<u>4</u>	<u>1516920059</u> <u>15-169-00172</u>	<u>990 FNL</u>	<u>FSL/FNL</u>	<u>2310 FEL</u>	<u>FEL/FWL</u>	<u>OIL</u>	<u>PROD</u>
<u>1</u>	<u>1516900893</u>	<u>1600 FNL</u>	<u>FSL/FNL</u>	<u>990 FWL</u>	<u>FEL/FWL</u>	<u>OIL</u>	<u>PROD</u>
<u> </u>	<u> </u>	<u> </u>	<u>FSL/FNL</u>	<u> </u>	<u>FEL/FWL</u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>	<u>FSL/FNL</u>	<u> </u>	<u>FEL/FWL</u>	<u> </u>	<u> </u>
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<u> </u>	<u> </u>	<u> </u>	<u>FSL/FNL</u>	<u> </u>	<u>FEL/FWL</u>	<u> </u>	<u> </u>

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.