

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 _____

Surface Pond Permit # _____
(API No. If Drill Pit)

Identify: Emergency Pit ☐ Burn Pit ☐

Effective Date of Transfer June 1, 96

Lease Name BUCKBEE

_____ Sec 14 T 20 R 12 W/E

Legal Description of Lease: _____

SE 1/4 NE 1/4, S 1/2 NE 1/4 NE 1/4 Sec 14 20S 12W

County BARTON

Production Zone(s) Arbuckle/Lansing

Injection Zone(s) _____

_____ Feet from N/S Line of Section
_____ Feet from E/W Line of Section

Storage Pit ☐ Drill Pit ☐

Past Operator's License No. 30537

Contact Person: Todd Smith

Past Operator's Name and Address:

Phone: 303-573-6634

VENTURE RESOURCES, INC.

518 17th St., #1130

Denver CO 80202

Title President

Date _____

Signature _____

New Operator's License No. 09764

Contact Person Clifford E. Stephens

New Operator's Name and Address

Phone 316-564-2909

STEPCO, INC.

BOX 265

ELLINWOOD, KS 67526

Oil/Gas Purchaser NCRA

Date Sept. 11, 1996

Title PRESIDENT

Signature Clifford E. Stephens

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

BUCKBEE

API NO.
(YR DRLD/PRE '67)

*LOCATION: 14-20-12W BT CO

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

WELL STATUS
(PROD/TA'D
ABANDONED)

circle **circle**
FSL/FNL **FEL/FWL**

PROD

FSL/FNL _____ FEL/FWL _____

FSL/FNL _____ FEL/FWL _____

FSL/FNL _____ FEL/FNL _____

FSL/FNL _____ FEL/FWL _____

FSL/FNL _____ FEL/FWL _____

FSL/FNL _____ FSL/FNL _____

FSL/FNL — FEL/FWL

FSL/FNL — FEL/FWL

FSL/FNL — FEL/FWL

_____ FSL/FNL _____ FEL/FWL

_____ FSL/FNL FSL/FNL

_____ TNY/TNL

_____ TNY/TNY

_____ TML/TML TML/TML

_____ FSL/FNL FSL/FNL

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.