

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

924

Check Applicable Boxes:

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

[X] Gas Lease: No. of Wells 1 **

** 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 Alford

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

Identify: Emergency Pit ☐ Burn Pit ☐

Effective Date of Transfer 7-1-95

Lease Name Booth

- - SE- SE Sec 36 T 30S R 18 W

Legal Description of Lease: SE/4

36-30S-18W

County Kiowa

Production Zone(s) Mississippi

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. 6234 ✓

Past Operator's Name and Address:
Petroleum Production Management, Inc.
7101 College Blvd., Suite 330
Overland Park, KS 66210
Title Vice President

New Operator's License No. 31714 ✓

New Operator's Name and Address
Novy Oil & Gas, Inc.
209 E. William, Suite 200
Wichita, KS 67202

Title President

Contact Person: Larry Miller

Phone: (913) 469-8118

Date 8-1-95

Signature Larry Miller

Contact Person Frank E. Novy

Phone (316) 265-4651

Oil/Gas Purchaser Gas - Texaco

Date 8-1-95

Signature Frank E. Novy

RECEIVED
KANSAS CORPORATION COMMISSION
AUG 07 1995
CONSERVATION DIVISION
WICHITA, KS

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

*LOCATION: C SE SE Sec. 36-30S-18W

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

WELL STATUS
(PROD/TA'D
ABANDONED)

Prod.

FEL/FWL

FEL/FWL

TMI/TET

TMA/TFA

TMR/TFL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWI

FBI/FWI

FBI / FWT

FET / FMT

PLT

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.