

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:

Effective Date of Transfer 7/1/95

[ X ] Oil Lease: No. of Wells 1 \*\*

Lease Name CRITCHFIELD

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

       -        -        SE Sec 3 T 16S R 3 W W

\*\* SIDE TWO MUST BE COMPLETED \*\*

Legal Description of Lease:       

[ ] Saltwater Disposal Well - Docket No.         
Spot Location:        feet from N/S Line  
       feet from E/W Line

THE SOUTHEAST QUARTER

[ ] Enhanced Recovery Proj. Docket No.         
Entire project: Yes/No  
Number of injection wells        \*\*

County SALINE

Production Zone(s) MAQUOKETA DOL.

Field Name OLSSON

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 ☐ JR

\*\*\*\*\*  
Past Operator's License No. 31475

Contact Person: MARK CASEBEER

Past Operator's Name and Address:

Phone: 913-227-2886

MARK S. CASEBEER  
213 N.3RD  
LINDSBORG KS 67456

Date 7/11/95

Title OWNER

Signature Mark Casebeer

\*\*\*\*\*  
New Operator's License No. 31478

Contact Person DON SIMS

New Operator's Name and Address

Phone 913-667-3291

DON SIMS OIL  
108 N.MAIN  
BRIDGEPORT KS 67424

Oil/Gas Purchaser NCRA

Date 7-12-95

Title OWNER

Signature Don Sims

\*\*\*\*\*  
**ACKNOWLEDGEMENT OF TRANSFER:** The above request for transfer of injection authorization surface pond permit #        has been noted, approved and duly recorded in the record 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 \_\_\_\_\_

\*LOCATION: \_\_\_\_\_

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 _____	
		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 _____	
		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.