J.H.

REQUEST FOR CHANGE OF OPERATOR SRF
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 _____ **

[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 Oro

Effective Date of Transfer 8/1/95

Lease Name Baker

__-SW-NE-SE Sec 9 T 20S R 19 (W)/E

Legal Description of Lease: _____

SE/4 Section 9

County Pawnee

Production Zone(s) Chase

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 ☐

****

Past Operator's License No. 31499

Past Operator's Name and Address:
Harper Equity, Inc.
3384 W.Saratoga Ave.
Englewood, CO 80110

Title President

Contact Person: Gary Foster

Phone: (303)347-8208

Date 8/15/95

Signature _____

RECEIVED
STATE CORPORATION COMMISSION
SEP 05 1995
CONSERVATION DIVISION
WICHITA, KANSAS

****

New Operator's License No. 31545

New Operator's Name and Address
Blackjack Oil & Gas, Inc.
P.O. Box 5127
Enid, OK 73702

Title President

Contact Person Gary Foster

Phone (405)237-0117

Oil/Gas Purchaser Oil - None
Gas - Enron Gas Marketing, Inc.

Date 8/15/95

Signature _____

****

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 Kansa
Corporation Commission records only and does not convey any ownership interest in the abov
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 th
new operator of the above named lease containi
the surface pond permitted by #_____

Date _____ _____
Authorized Signature

P Form T1 7/

*LEASE NAME Baker

MUST BE FILED FOR ALL WELLS

*LOCATION: 9-T20S-R19W; SE/4

SIDE 2
T1 7/94

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)
9-9	15-145-01,005	1630	Circle FSL/FNL	990	Circle FEL/FWL	Gas	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		
			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

transferring a unit which consists of more than one lease please file a separate
lease. If a lease covers more than one section please