

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 _____ **

[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 Carver/Robbins/Fruit

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

Identify: Emergency Pit ☐

Burn Pit ☐

Storage Pit ☐

Drill Pit ☐

Effective Date of Transfer 8/1/95

Lease Name HENDRICKS

_____-_____-_____- Sec 14 T 27 R 16 W X

Legal Description of Lease: S/2

County Kiowa

Production Zone(s) Kinderhook

Injection Zone(s) _____

_____-_____-_____- Feet from N/S Line of Section

_____-_____-_____- Feet from E/W Line of Section

✓ Past Operator's License No. 05414

Contact Person: J. Mark Richardson

Past operator's name and address:

Phone: (316) 262-3192

J. Mark Richardson
155 N. Market, Suite 840
Wichita, KS 67202

✓ Date 8-8-95

✓ Signature J. Mark Richardson

Title Owner

New Operator's License No. 31530

Contact Person V.R. CHINTALA

New Operator's Name and Address

Phone (405) 840-9280

AMERICAN OILFIELD SYSTEMS, INC.
6600 N. MERIDIAN, SUITE 135
OKLAHOMA CITY, OK 73116

Oil/Gas Purchaser _____

Date 9/27/95

Title MANAGER / OPERATIONS

Signature [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 in _____, Kansas

Date _____

Authorized Signature _____

Date _____

Authorized Signature _____

Form T1 7/94

*LOCATION:

API NO.
(YR DRLD/PRE '67) *

WELL STATUS
(PROD/TA'D
ABANDONED)

Circle

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWT

FEL/FWL

FEEL/FWL

FEL/FWI

FEL/FWL

FEL/FWL

FEL/FWT

FEL/FWL

FEL/FWL

FEEL/FWL

FEEL/FWL

TMA/TMA

TUEL/KWL

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.