

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 8/1/96

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

Lease Name Hewitt

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

_____-_____-_____- Sec 22 T 21 R 12 W XX

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: _____

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

_____ W/2 NW/4

_____ feet from E/W Line

County Stafford

[] Enhanced Recovery Proj. Docket No. _____

Production Zone(s) Arbuckle

Entire project: Yes/No

Number of injection wells _____ **

Field Name Mueller

Injection Zone(s) _____

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

_____ Feet from N/S Line of Section

_____ Feet from E/W Line of Section

Identify: Emergency Pit ☐

Burn Pit ☐

Storage Pit ☐

Drill Pit ☐

Past Operator's License No. 6016 ✓

Contact Person: John Remmert

Past Operator's Name and Address:

Phone: 316-792-1340

Condor Energy, Inc.

P O Box 108

Date 12/3/96

Title Great Bend, KS 67530
President

Signature [Signature]

New Operator's License No. 31164 ✓

Contact Person Clarence Barta

New Operator's Name and Address

Phone 316-792-6237

Double B Oil

Route 1

Oil/Gas Purchaser NCRA

Great Bend, KS 67530

Date Dec. 4, 1996

Title Owner/Operator

Signature Clarence R. Barta

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 _____

Form T1 7/94

*LOCATION: SE SW NW

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

TYPE OF WELL
(OIL/GAS
INJ/MSW)

WELL STATUS
(PROD/TA'D
ABANDONED)

Circle
FSL/FNL 4290 **Circle**
FEL/FWL

producing

FEL/FWL**FEL/FWL****FEL/FWL**

FEL/FWL

FEL/FWL

FEEL/FWL**FEL/FWL**

FEL/FWI

FEL/FWI

FEL/FWI

FET./FWT

FET / EMT

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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