

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 8/1/98

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

Lease Name Smith

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

-SE-NE-NW Sec 21 T 20S R 19 (W/E)

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: _____

[] Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N/S Line

NW/4 Section 21

_____ feet from E/W Line

[] Enhanced Recovery Proj. Docket No. _____

County Pawnee

Entire project: Yes/No

Number of injection wells _____ **

Production Zone(s) Chase

Field Name Unnamed

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. 31545

Contact Person: Gary Foster

Past Operator's Name and Address:

Blackjack Oil & Gas, Inc.

P.O. Box 127

Hennessey, OK 73742

Phone: (405)853-7195

Date August 1, 1998

Title President

Signature [Signature]

New Operator's License No. 32364

Contact Person Jeff Holcomb

New Operator's Name and Address

Phone (505)326-0550

Holcomb Oil & Gas, Inc.

P.O. Box 2058

Farmington, NM 87499

Oil - None
Oil/Gas Purchaser Gas - Enron Capital & Trade

Date September 15, 1998

Title President

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 by # _____

Date _____

Authorized Signature

Date _____

Authorized Signature

Form T1 7/94

EPK

MUST BE FILED FOR ALL WELLS

*LEASE NAME	Smith
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***LOCATION:** 21-T20S-R19W; NW/4

WELL NO.	API NO.	(YR DRLD/PRE '67)
1	2	3
4	5	6
7	8	9
10	11	12
13	14	15
16	17	18
19	20	21
22	23	24
25	26	27
28	29	30
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364	365	366

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

TYPE OF WELL	WELL STATUS
(OIL/GAS	(PROD/TA'D
INJ/WSW)	ABANDONED)

[illegible]

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.