Check Applicable Boxes: [] Oil Lease: No. of Wells 1	KANSAS CORPORATION COMMISSION CONSERVATION DIVISION 130 S MARKET, ROOM 2078 WICHITA, KANSAS 67202			
[] Oil Lease: No. of Wells 1 ** Lease Name Feltes "A" [] Gas Lease: No. of Wells **NW - NE Sec 34 T16S R ** 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 [] Enhanced Recovery Proj. Docket No Entire project: Yes/No Number of injection wells ** Production Zone(s) Pield Name Injection Zone(s) ***********************************				
[] Gas Lease: No. of Wells	Effective Date of Transfer 9-1-95			
Legal Description of Lease: [] 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 Field Name Injection Zone(s) Surface Pond Permit f (API No. If Drill Pit) Feet from N/S Line of (API No. If Drill Pit) Feet from E/W Line of The storage Pit Feet from E/W Line of Contact Person: Contact Person: L. D. Davis Past Operator's Name and Address: Phone: (316) 793-3051				
[] Saltwater Disposal Well - Docket No. Spot Location: feet from N/S Line feet from B/W Line [] Enhanced Recovery Proj. Docket No. Entire project: Yes/No. Number of injection wells Field Name Injection Zone(s) Field Name Feet from N/S Line of (API No. If Drill Pit) Identify: Emergency Pit Burn Pit Storage Pit Drill Pit Fast Operator's License No. 4656 Contact Person: L. D. Davis Phone: (316) 793-3051	12 W/E			
Entire project: Yes/No Number of injection wells ** Production Zone(s) Field Name Injection Zone(s) Surface Pond Permit # Feet from N/S Line of (API No. If Drill Pit) Identify: Emergency Pit Burn Pit Storage Pit Drill Pit Past Operator's License No. 4656 Contact Person: L. D. Davis Past Operator's Name and Address: Phone: (316) 793-3051				
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Surface Pond Permit # [API No. If Drill Pit] The storage Pit				
Surface Pond Permit # Feet from N/S Line of Feet from E/W Line of				
Past Operator's License No. 4656 Contact Person: L. D. Davis Past Operator's Name and Address: Phone: (316) 793-3051	Section			
Past Operator's Name and Address: Phone: (316) 793-3051	******			
Devia Patraloum Tra				
Davis Patrolaum Tro				
R.R. 1 Box 183 B Date September 1, 1995				
Great Bend, Kansas 67530 Title President Signature Signature				
New Operator's License No. 04871 / Contact Person Curtis Hitschmann	*****			
New Operator's Name and Address Phone (316) 792-6252				
Curt's Oil Operations P. O. Box 8 Oil/Gas Purchaser N.C.R.A				
Great Bend, Kansas 67530 Date 10-10-95				
Title Operator Signature / Cutt Intelement	n			
**************************************	******			
ACKNOWLEDGEMENT OF TRANSFER: The above request for transfer of injection authorized pond permit # has been noted, approved and duly recorded in to the Kansas Corporation Commission. This acknowledgement of transfer pertains Corporation Commission records only and does not convey any ownership interest in injection well(s) or pond permit.	to Kansas			
is acknowledged is acknowledged is acknowledged				
as the new operator and may continue to inject fluids as authorized by Docket # the surface pond permitted by #RATION COL	containing			
Recommended action OCT 1 7 199.				
Date CONSERVATION DIVISION DIVISIONI DIVISION DIVISION DIVISION DIVISION DIVISIONI DIVISION	5			
Authorized Signature Authorized Signatur	ON			

	;	MUST BE FILED FOR ALL WEL	rs ;		11 .// .
*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		
	1	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	1	FSL/FNL	FEL/FWL		
<u> </u>		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	1	FSL/FNL	FEL/FWL	-	
		FSL/FNL	FEL/FWL		
	,	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		, , , , , , , , , , , , , , , , , , ,
		FSL/FNL	FEL/FWL		i •

A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

FSL/FNL _____ FEL/FWL

FSL/FNL _____ FEL/FWL

*When transferring a unit which consists of more than one lease please file a separate side two for