

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:

- [X] Oil Lease: No. of Wells 2 **
- [] Gas Lease: No. of Wells _____ **
- ** 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 _____ **

Effective Date of Transfer 9/1/95

Lease Name Studer #1-3 & #2-3

NE Sec 3 T 27S R 12 W/Z

Legal Description of Lease: _____

N/2 NE/4 Sec. 3-T27S-R12W

County Pratt

Production Zone(s) Mississippi

Field Name Stead South

Injection Zone(s) None

Surface Pond Permit # N/A
(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. 30349 Contact Person: Alan Banta

Past Operator's Name and Address: Vess-Transpacific Operating Co., Inc.
P.O. Box 1639
Wichita, KS 67201-1639 Phone: 316-262-3596
Date 8/30/95

Title Vice-President Signature [Signature]

New Operator's License No. 9408 Contact Person Alan Banta

New Operator's Name and Address Trans Pacific Oil Corporation
1000 One Main Place Phone 316-262-3596

Wichita, KS 67202 Oil/Gas Purchaser National Cooperative Refinery Assoc

Date 8/30/95

Title Vice-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 record 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 _____
Date _____ Authorized Signature _____

_____ is acknowledged as the new operator of the above named lease containing the surface pond permitted by # _____.
SEP 11 1995
Date _____ Authorized Signature _____
FORM T1 7/1

MUST BE FILED FOR ALL WELLS

***LOCATION:** N/2 NE/4 Sec. 3-T27S-R12W

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

TYPE OF WELL
(OIL/GAS
INJ/WSW)

WELL STATUS
(PROD/TA'D
ABANDONED)

***LEASE NAME**

API NO.
(YR DRID/PRE '67)

WELL NO.

Studer

#1-3

15-151-21, 552

660

Circle
FSL/FNL 1430 FEL/FNL

Oil

Prod.

#2-3

15-151-21, 598

660

FSL/FNL 660 FEL/FNL

Oil

Prod.

RECEIVED
STATE CORPORATION COMMISSION

SEP 11 1995

Oil

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 well if located in more than one section please indicate which section each well is located in.