

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 Rhodes

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

Identify: Emergency Pit ☐ Burn Pit ☐

Effective Date of Transfer 9/1/97

Lease Name NEWKIRK, W. A.

_____ - _____ - _____ Sec 8 T 33 R 11 W/E

Legal Description of Lease: _____

S/2, S/2N/2, Sec. 9 NW/4

County Barber

Production Zone(s) Mississippi

Injection Zone(s) _____

_____ Feet from N/S Line of Section
_____ Feet from E/W Line of Section

Storage Pit ☐ Drill Pit ☐

Past Operator's License No. 30385

Contact Person: J. Hugh Liedtke, Jr.

Past Operator's Name and Address:

Liedtke Operating Corporation
475 17th Street, Suite 960
Denver, CO. 80202

Phone: 303-292-2390

Date September 16, 1997

Title President

Signature [Signature]

New Operator's License No. 31653

Contact Person Randall K. Arnold

New Operator's Name and Address:

Buffalo Operating LLC
1888 Sherman Street, Suite 760
Denver, CO. 80203-1160

Phone 303-813-1568

Oil/Gas Purchaser KPL

Date September 16, 1997

Signature [Signature]

Title Manager

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 _____

Date _____
Authorized Signature _____

_____ is acknowledged as the new operator of the above named lease containing the surface pond permitted by # _____

Date _____
Authorized Signature _____
Form T1 7/94

*LOCATION: Sec. 8, T33S, R11W

API NO.
(YR DRLD/PRE '67)

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

WELL STATUS
(PROD/TA'D
ABANDONED)

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