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

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Check Applicable Boxes:

RECEIVED
KANSAS CORPORATION COMMISSION
OCT 02 1998
CONSERVATION DIVISION
WICHITA, KS

Effective Date of Transfer 9/1/98

[X] Oil Lease: No. of Wells 5 ** Lease Name Mohler Unit

[ ] Gas Lease: No. of Wells _____ ** ___-___-___-___ Sec 31 T 33 R 29 (W/E)

** SIDE TWO MUST BE COMPLETED **

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

Legal Description of Lease: See attached description.

[X] Enhanced Recovery Proj. Docket No E-26,993 County Meade
Entire project: Yes/No
Number of injection wells 6 ** Production Zone(s) Morrow

Field Name Northeast Mohler Injection Zone(s) Morrow

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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 ☐

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Past Operator's License No. 32158 Contact Person: Al Hammersmith

Past Operator's Name and Address:
H&B Petroleum Corporation
P.O. Box 536
Clearwater, KS 67026

Phone: (316) 564-3002

Date 9/30/98

Title President Signature _____

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New Operator's License No. 5055 Contact Person Dave Pauly

New Operator's Name and Address
C.H. Todd, Inc.
100 S. Main
Suite 415
Wichita, KS 67202

Phone (316) 264-7566

Oil/Gas Purchaser NCRA

Date 9/30/98

Title Vice President Signature _____

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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
EPR

MUST BE FILED FOR ALL WELLS

***LEASE NAME** Mohler Unit ***LOCATION:** Meade County

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		Circle			
1	Sec 24-33S-29W None assigned(1958)	330	(FSL)/FNL	330	(FEL)/FWL	Inj.	Inactive
2	Sec 19-33S-28W None assigned(1958)	330	(FSL)/FNL	4950	(FEL)/FWL	Inj.	Inactive
3	Sec 30-33S-28W 15-119-20408	660	FSL/(FNL)	1980	FEL/(FWL)	Oil	Active
4	Sec 30-33S-28W 15-119-20425	660	FSL/(FNL)	2310	(FEL)/FWL	Oil	Active
5	Sec 30-33S-28W 15-119-20384	2310	FSL/(FNL)	2310	~~(FEL)~~/(FWL)	Inj.	Active
6	Sec 30-33S-28W 15-119-20332	2310	FSL/(FNL)	2310	(FEL)/FWL	Inj.	Active
7	Sec 30-33S-28W 15-119-20829	2247	FSL/(FNL)	971	(FEL)/FWL	Inj.	Inactive
9	Sec 30-33S-28W 15-119-20427	2190	(FSL)/FNL	2310	FEL/(FWL)	Oil	Active
10	Sec 30-33S-28W 15-119-20805	2405	(FSL)/FNL	1552	(FEL)/FWL	Oil	Active
14	Sec 30-33S-28W 15-119-20309	1320	(FSL)/FNL	1320	(FEL)/FWL	Inj.	Active
15	Sec 31-33S-28W 15-119-20653	4620	(FSL)/FNL	1980	(FEL)/FWL	Oil	Active
WSW #1	Sec 30-33S-28W None assigned(1958)	330	FSL/(FNL)	330	FEL/(FWL)	WSW	Inactive
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		

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