

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 9/1/99

[] Oil Lease: No. of Wells ___ **
[x] Gas Lease: No. of Wells ___ 1 ___ **
** SIDE TWO MUST BE COMPLETED **

Lease Name: Hermann
SE/4 Sec 9 T 23S R 40W (W) E

Legal Description of Lease:

[] Saltwater Disposal Well - Docket No. _____
Spot Location: _____ feet from N/S Line Section 9: SE/4 231S 409W
_____ feet from E/W Line
[] Enhanced Recovery Proj. Docket No. _____ County Hamilton
Entire project: Yes/No
Number of injection wells _____ ** Production Zone(s) Winfield

Field Name Zerfas East 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. 32034 Contact Person: Hal C. Porter

Past Operator's Name and Address: Phone: 316-773-3808

Hal C. Porter, 10004 W 20th St N Date September 10, 1999
Wichita KS 67212
Title Operator Signature *Hal C. Porter*

New Operator's License No. 32511 Contact Person: Hal C. Porter

New Operator's Name and Address: Phone 316-773-3808
Imperial American Oil Corporation
10004 W 20th St N, Wichita KS 67212

Oil/Gas Purchaser: Cooperative Refining

Date September 10, 1999

Title President Signature *Hal C. Porter*

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

EP&R 9/13/99 PROD 10-7-99 UIC 10-13-99

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KANSAS CORP COMM
1999 SEP 13 P 1:21

SIDE 2

*LOCATION: SE/4 Section 9, T23S, R40W, Hamilton County

WELL STATUS
(PROD/TA'D
ABANDONED)

Producing

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.