

REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION AUTHORIZATION
OR TRANSFER OF SURFACE POND PERMIT

KANSAS CORPORATION COMMISSION
CONSERVATION DIVISION
200 COLORADO DERBY BLDG.
WICHITA, KANSAS 67202

Check Applicable Boxes:

[] Oil Lease: No. of Wells

Effective Date of Transfer 9/1/99

Lease Name PARKIN #1-5

[X] Gas Lease: No. of Wells 1 **

- C- NE - NW Sec. 5 T 30 S. R 19 W/E

** SIDE TWO MUST BE COMPLETED**

Legal Description of Leases E/2 NW/4

[] Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N/S Line

_____ feet from E/W Line

County KIOWA

[] Enhanced Recovery Project Docket No. _____

Entire project: Yes/No

Number of injection wells _____

Production Zone(s) Mississippi

Field Name Alford

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 _____

List API#'s on all post-1967 wells transferred with lease: _____

Past Operator's License No. 8061 ✓

Contact Person: John S. Weir

Past Operator's Name and Address:

OIL PRODUCERS, INC. OF KS.

2843 KEY WEST CT.

WICHITA, KS. 67204

Phone: 316-681-0231

Oil & Gas Purchaser _____

Title President

Signature John S. Weir

New Operator's License No. 3344 ✓

Contact Person JAMES GREY

New Operator's Name and Address

Phone 316-546-5767

Magnum Oil & Gas

Oil & Gas Purchaser Kansas Gas Supply

Date 10-1-99

Title President

Signature James Grey

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 acknowledgment 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

2-10-TT

5-30S-19W

WZU

PALKIN #1 C

API NO.
(YR DRLD/PRE '67)

(YR DRLD/PRE '67) -

***LOCATION:**

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

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

[illegible]

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.