

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 1999 SEP - 9 A 11:53 **

[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 Alford

Effective Date of Transfer 9/1/99

Lease Name Parkin #4

_____ Sec 9 T 30S R 18 (W/E

Legal Description of Lease: _____

All Section 9-30S-18W

County Kiowa

Production Zone(s) Mississippian

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. 6769

Contact Person: Gordon Penny

Past Operator's Name and Address:
Westmore Drilling Company, Inc.
1614 Cypress Point Drive
Lawrence, Kansas 66047-1721

Phone: (785) 749-3712

Date 9-1-99

Title President

Signature Gordon Penny

New Operator's License No. 5363

Contact Person Gary Misak

New Operator's Name and Address
BEREXCO INC.
100 N. Broadway, Suite 970
Wichita, Kansas 67202

Phone (316) 265-3311

Oil/Gas Purchaser _____

Date 8/26/99

Title _____

Signature Gary L. Mail

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

*LEASE NAME	Parkin

*LOCATION: Sec. 9-30S-18W

API NO.
(YR DRLD/PRE '67)

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

WELL NO.

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

4

15-097-30183

Circle 1980
FSL/FNL

FSL/FNL _____ FEL/FWL _____

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FSL/FNL : FEL/FWL

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PRODUCING

[illegible]

*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.