

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:

RECEIVED
KANSAS CORP COMM

Effective Date of Transfer Sept. 15, 1999

[X] Oil Lease: No. of Wells 999 (one) ** A 11: 54

Lease Name Eagle Packard

[] Gas Lease: No. of Wells _____ **

- C -S/2 - SW Sec 14 T 31 R 13 W W/E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: _____

[] Saltwater Disposal Well - Docket No. _____

W/2 SW/4 Section 14-31S-13W

Spot Location: _____ feet from N/S Line

_____ feet from E/W Line

[] Enhanced Recovery Proj. Docket No. _____

County Barber

Entire project: Yes/No

Number of injection wells _____ **

Production Zone(s) Lansing

Field Name Nurse

Injection Zone(s) N/A

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. 5105 30360

Contact Person: Lynn Packard

Past Operator's Name and Address:

Phone: (316) 886-5295

Lynn Packard

514 North Walnut

Date September 15, 1999

Medicine Lodge, KS 67104

Title Owner

Signature Lynn Packard

New Operator's License No. 31406 ✓

Contact Person Robert W. Packard

New Operator's Name and Address

Phone (303) 840-3313

Prairie Resources, Inc.

1016 Amanda Pines Drive

Parker, CO 80138

Oil/Gas Purchaser National Cooperative Refining Asso

Date September 15, 1999

Title President

Signature Robert W. Packard

ACKNOWLEDGEMENT OF TRANSFER: The above request for transfer of injection authorization, surface pond permit # _____ has been noted, approved and duly recorded in the record 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

Eagle Packard

API NO.
(YR DRLD/PRE '67)

W/2 SW/4 14-31S-13W

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

[illegible]

15-00721187

**Circle
FSL/FNL**

**Circle
FEL/FWI**

Shut In

[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 contains more than one wellhead, file a separate side two for each wellhead.