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

KDOR: 133055

****

Check Applicable Boxes:

Effective Date of Transfer 10/1/95

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

Lease Name JOHNSON TRUST

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

__-__-__-__ Sec 8 T 21 R 8 W/E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: S/2 SW/4

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

except a 10-acre tr. (Metes & Bounds)

[ ] Enhanced Recovery Proj. Docket No_____
Entire project: Yes/No
Number of injection wells _____**

County Rice

Production Zone(s) Simpson Sand

Field Name _____

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 ☐ JR

****

Past Operator's License No. 6141

Contact Person: LeeRoy A. Legleiter

Past operator's name and address:
Coronado Oil & Gas, Inc.
P.O. Box 1285
Great Bend, KS 67530

Phone: (316) 792-6702

Date Oct. 6, 1995

Title V.P. of Production

Signature LeeRoy A. Legleiter

****

New Operator's License No. 31174

Contact Person Henry M. Ruble

New Operator's Name and Address

Bighorn Oil
P.O. Box 263
Great Bend, KS 67530

Phone 316-793-3160

Oil/Gas Purchaser Koch Oil

Date November 7, 1995

Title Co-Owner

Signature Henry M. Ruble

RECEIVED
STATE CORPORATION COMMISSION
NOV - 9 1995
WICHITA, KANSAS

****

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

P

MUST BE FILED FOR ALL WELLS

*LEASE NAME Johnson Trust *LOCATION: Lane Co.

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)
1	API 15-159-22347-0001	660'	Circle FSL/FNL	330'	Circle FEL/FWL	Oil	Producing
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			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 each lease. If a lease covers more than one section please indicate which section each well is located.