

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 \_\_\_\_\_ \*\*

[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 \_\_\_\_\_

Surface Pond Permit # N/A  
(API No. If Drill Pit)

Identify: Emergency Pit ☐

Burn Pit ☐

Storage Pit ☐

Drill Pit ☐

Past Operator's License No. 31734

Past Operator's Name and Address:

Costilla Petroleum Corporation

P.O. Box 10369

Midland, TX 79702

Title Regulatory Analyst

New Operator's License No. 31021

New Operator's Name and Address

Castelli Exploration, Inc.

9500 Westgate Drive, Suite 101

Oklahoma City, OK 73162

Title President

**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 \_\_\_\_\_

Effective Date of Transfer 10/01/95

Lease Name Roehr #2-8

\_\_\_\_\_ Sec 8 T 32 R 31 W/E

Legal Description of Lease: \_\_\_\_\_

NE

County Seward

Production Zone(s) Morrow

Injection Zone(s) \_\_\_\_\_

\_\_\_\_\_ Feet from N/S Line of Section

\_\_\_\_\_ Feet from E/W Line of Section

Contact Person: Chris McCracken

Phone: 915/686-6021

Date December 5, 1995

Signature Chris McCracken

Contact Person Mr. Thomas P. Castelli

Phone 405/722-5511

Oil/Gas Purchaser Koch Oil Company

Date 12-5-95

Signature Thomas P. Castelli

\_\_\_\_\_ is acknowledged as the new operator of the above named lease containing the surface pond permitted by # \_\_\_\_\_

Date \_\_\_\_\_  
Authorized Signature \_\_\_\_\_

Form T1 7/9

ROEHR

API NO.  
(YR DRLD/PRE '67)

\*LOCATION: 8-325-31W

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

TYPE OF WELL  
(OIL/GAS  
INJ/MSW)

WELL STATUS  
(PROD/TA'D  
ABANDONED)

15-175-21043

Circle ~~FSL~~/FNL 4290'  
Circle FEL/FWL 1725'

GASProd

FSL/FNL \_\_\_\_\_ FEL/FWL \_\_\_\_\_

FSL/FNL \_\_\_\_\_ FEL/FWL \_\_\_\_\_

FSL/FNL \_\_\_\_\_ FEL/FWL \_\_\_\_\_

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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.