TRANSFER OF INJECTION AUTHORIZATION   CONSERVATION DIVISION
OR TRANSFER OF SURFACE POND PERMIT   200 COLORADO DERBY BLDG.
**************************************   WICHITA, KS 67202

Effective Date of Transfer ___10-1-96___

Lease Name ___Huck 1-17___   [X] Oil Lease: No. of Wells ___1___

___17___ Sec. T ___30___ S R ___20___ W/EX   [ ] Gas Lease: No. of Wells _____

Legal Description of Lease: ___C-SW-SW___   [ ] 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
Production Zone(s) ___Cherokee___   Number of injection wells _____

Injection Zone(s) _____   Field Name ___Excel___
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Surface Pond Permit # _____   _____ Feet from N/S Line of Section
                          _____ Feet from E/W Line of Section

Identify: Emergency Pit ☐   Burn Pit ☐   Storage Pit ☐

List API#'s on all post-1967 wells transferred with lease: 15-097-20,429

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Past Operator's License No. 03399   Contact Person: Michael Farrar

Past Operator's Name and Address: Phone: 316-886-3763
Farrar Pump & Supply Co., Inc.
P.O. Box 209   Date ___10/22/96___
Medicine Lodge, KS 67104
Title President   Signature _____
****
New Operator's License No. 31938   Contact Person Michael Farrar

New Operator's Name and Address   Phone   316-886-3763
Indian Oil Co., Inc.
P.O. Box 209   Oil/Gas Purchaser ___Wickford Energy___
Medicine Lodge, KS 67104
                      Date ___10/22/96___
Title President   Signature _____
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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.
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_____ is acknowledged   _____ is acknowledged as the
as the new operator and may continue to new operator of the above named lease containing
inject fluids as authorized by Docket # the surface pond permitted by #_____.
_____. Recommended action _____

Date _____   Date _____
    Authorized Signature   Authorized Signature
                                          Form T1 10/91