

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 Kismet

Surface Pond Permit # 15-175-20084
(API No. If Drill Pit)

Identify: Emergency Pit ☐

Burn Pit ☐

Storage Pit ☐

Drill Pit ☐

Effective Date of Transfer 10/15/99

Lease Name Gram

-C - SW-NW Sec 15 T 33S R 31 W/E

Legal Description of Lease: _____

Nw/4 of Section 15-33S-31W

County Seward

Production Zone(s) Marmaton/Morrow

Injection Zone(s) None

1980 Feet from (N)S Line of Section
660 Feet from (W)E Line of Section

Past Operator's License No. 4040 ✓

Contact Person: F.W. Mallonee

Past Operator's Name and Address:

Mallonee, Inc.

8419 E. Harry, Suite 401

Wichita, KS67207

Title President

Phone: (316) 681-1818

Date 10/15/99

Signature F.W. Mallonee

New Operator's License No. 9408 ✓

Contact Person Alan D. Banta

New Operator's Name and Address

Trans Pacific Oil Corporation

100 South Main, Suite 200

Wichita, KS 67202

Phone (316) 262-3596

Oil/Gas Purchaser Cibola

Date 10/15/99

Title Senior Vice President

Signature Alan D. Banta

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

MUST BE FILED FOR ALL WELLS

*LEASE NAME

Gram

*LOCATION: C SW NW Section 15-33S-31W

API NO.

(YR DRLD/PRE '67) -

FOOTAGE FROM SECTION LINE

(i.e. FSL=Feet from South Line)

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

TYPE OF WELL
(OIL/GAS
INJ/WSW)

1

15-175-20084

1980'

Circle
FSL/FNL

660

Circle
FEL/FWL

८३

FEL/FWL

FEL/FWL

$$\text{FEL}/\text{FWL}$$

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

$$\text{FEL}/\text{FWL}$$

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.