

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

ORIGINAL

Effective Date of Transfer 11-1-97

Check Applicable Boxes:

Lease Name Gates

[X] Oil Lease: No. of Wells 1

SW-SW-NE Sec. 16 T 24 S. R 30 W/X

[] Gas Lease: No. of Wells _____

Legal Description of Lease: Northeast
Quarter of 16-T24S-R30W

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

County Gray

[] Enhanced Recovery Project Docket No. _____

Production Zone(s) St. Louis B

Entire project: Yes/No
Number of injection wells _____

Injection Zone(s) _____

Field Name Gray Line

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: _____

Past Operator's License No. 31120

Contact Person: Allen J. Gross

Past Operator's Name and Address:

Pelican Hill Oil & Gas, Inc.
1401 N. El Camino Real, Ste. 207
San Clemente, CA 92672

Phone: 714/498-2101

Date 11-1-97

Title President

Signature Allen J. Gross

New Operator's License No. 4058

Contact Person Cecil O'Brate

New Operator's Name and Address

American Warrior, Inc.
P.O. Box 399
Garden City, Kansas

Phone 316/275-9231

Oil/Gas Purchaser Koch Oil Company

Date 11-1-97

Title President

Signature Cecil O'Brate

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 _____

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

Date _____
Authorized Signature _____

Date _____
Authorized Signature _____

*LOCATION. SW SW NE 16-24-30

Gray County, Kansas
FOOTAGE FROM SECTION LINE
(i.e. FSL=Feet from South Line)

WELL STATUS
(PROD/TA'D
ABANDONED)

PUMP ING

[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 covers more than one section please indicate which section each well is located.