

REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION AUTHORIZATION
OR TRANSFER OF SURFACE POND PERMIT

KANSAS CORPORATION COMMISSION
CONSERVATION DIVISION *NIM*
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 Angell

Surface Pond Permit # _____
(API No. If Drill Pit)

Identify: Emergency Pit ☐ Burn Pit ☐

Effective Date of Transfer 11-1-97

Lease Name SCHRIDDE

W/2- SW-SE- _____ Sec 21 T 32S R 29 W/4

Legal Description of Lease: SE/4 Sec/ 21;
NW/4 Sec. 27; SE/4 & SW/4 Sec. 22
All in Township 32 S, Range 29W

County Meade

Production Zone(s) Morrow

Injection Zone(s) _____

_____ Feet from N/S Line of Section
_____ Feet from E/W Line of Section

Storage Pit ☐ Drill Pit ☐ *ls*

Past Operator's License No. 5146 ✓

Contact Person: Juanita M. Green

Past Operator's Name and Address:

Rains & Williamson Oil Co., Inc.
220 W. Douglas, Suite 435
Wichita, Kansas 67202
Title President

Phone: (316) 265-9686

Date 12/5/97

Signature Juanita M. Green

New Operator's License No. 04951 ✓

Contact Person Daniel R. Claassen

New Operator's Name and Address

Claassen Oil and Gas, Inc.
6206 N. Wilder Court
Parker, Colorado 80134

Phone 303 841-1089

Oil/Gas Purchaser Cibola Energy Services

Date 12/11/97

Title President

Signature Daniel R. Claassen

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 _____

Schritte

API NO.
(YR DRLD/PRE '67) *

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

WELL STATUS
(PROD/TA'D
ABANDONED)

15-119-20, 576

circle circle
FSL/FHT 23101 FEL/FHT

प्र०:-

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

ESI/FNI
FEL/FWL

EST./ENT. FEL./FWL

EST./ENT. FEL./FWT.

EST./ENT. FEI./FET.

FET / ENT FET / ENT

DDT / DDT

THE

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.