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 _____ **

[XX] 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 WELLSFORD

Effective Date of Transfer 12/31/98

Lease Name SMITH #2-

NW 4 - - - Sec 30 T 28 R 15 W/E

Legal Description of Lease: NW/4
100' S OF NW NW NW

County PRATT COUNTY, KANSAS

Production Zone(s) _____

Injection Zone(s) _____

****

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

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

Identify: Emergency Pit ☐ Burn Pit ☐ Storage Pit ☐ Drill Pit ☐

****

Past Operator's License No. 31659

Past Operator's Name and Address:

LITTLE GUY OIL AND GAS LLC
310 CHAMPA
PRATT KS 67124

Title MANAGER

Contact Person: R G HOWE

Phone: (316) 672-2030

Date DECEMBER 31, 1998

Signature R G Howe MANAGER

****

New Operator's License No. 5893

New Operator's Name and Address

PRATT WELL SERVICE INC.
P O BOX 847
PRATT KS 67124

Title PRESIDENT

Contact Person KENNETH C GATES

Phone (316) 672-2531

Oil/Gas Purchaser DYNEGY (KS Gas Supply)

Date December 31, 1998

Signature Kenneth C. Gates
by Dorothy M Ferguson

****

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

RECEIVED
STATE CORPORATION COMMISSION
JAN - 6 1999
CONSERVATION DIVISION
Wichita, Kansas

C

SIDE 2

MUST BE FILED FOR ALL WELLS T1 7/94

*LEASE NAME SMITH #2 *LOCATION: Sec. 30-28S-15W PRATT COUNTY, KANSAS

WELL NO.	API NO. (YR DRLD/PRE '67)	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)				TYPE OF WELL (OIL/GAS INJ/WSW)	WELL STATUS (PROD/TA'D ABANDONED)	
#2	15-151-22009 ✓	430	Circle FSL/FNL	330	Circle FEL/FWL	Gas	Prod	100' S of NW NW NW
			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			
			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			
			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.