

FOR CHANGE OF OPERATOR
OF INJECTION AUTHORIZATION
OF SURFACE POND PERMIT

STATE CORPORATION COMMISSION
CONSERVATION DIVISION
200 COLORADO DERBY BLDG.
WICHITA, KS 67202

RECEIVED
KCC DISTRICT #2

AUG 26 1997

Effective Date of Transfer 7-16-97

Check Applicable Boxes:

WICHITA, KS

Lease Name BORN A

[] Oil Lease: No. of Wells

34 Sec. T 34 S R 5 ~~X~~ W E

[X] Gas Lease: No. of Wells 1

Legal Description of Lease: South 2/3rd
SE/4 SW/4 and a tract in the SW/4

[] Saltwater Disposal Well - Docket No.

Spot Location: _____ feet from N/S Line

_____ feet from E/W Line

County Cowley

[] Enhanced Recovery Project Docket No.

Entire project: Yes/No

Number of injection wells

Production Zone(s) Cleveland

Injection Zone(s) n/a

Field Name

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. 32091

Contact Person: George Saling

Past Operator's Name and Address:

K. T. S. SALVAGE, INC.

1325 Hwy 56

Lyons, KS 67554

Title President

Phone: (316) 257-5529

Date 7-16-97

Signature [Signature]

New Operator's License No. 32140

Contact Person Dan Krueger

New Operator's Name and Address

Phone (316) 442-5750

H J. BORN STONE, INC.

RR #3, Box 312

Arkansas City, KS 67005

Oil/Gas Purchaser none-on premise use

Date 7-16-97

Signature [Signature]

Title Vice-President

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

Form T1 10/91

LEASE NAME	API NO. (YR DRLD/PRE '67)	*LOCATION: _____		FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)	TYPE OF WELL (OIL/GAS INJ/WSW)	WELL STATUS (PROD/TA'D ABANDONED)
1	_____	_____	Circle FSL/FNL _____	Circle FEL/FWL _____	Disposal	_____
2	_____	_____	FSL/FNL _____	FEL/FWL _____	oil	prod
3	_____	_____	FSL/FNL _____	FEL/FWL _____	oil	prod
4	15-035-23407	_____	FSL/FNL _____	FEL/FWL _____	oil	TA
_____	_____	_____	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.