

TRANSFER OF INJECTION AUTHORIZATION
OR TRANSFER OF SURFACE POND PERMIT

CONSERVATION DIVISION
130 S MARKET, ROOM 2078
WICHITA, KANSAS 67202

Check Applicable Boxes:

[] Oil Lease: No. of Wells _____ **

[x] Gas Lease: No. of Wells _____ | **
** 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 _____ **

Effective Date of Transfer 1-1-95

Lease Name Hokr #1

Sec 5 T 16 R 8 W/E

Legal Description of Lease: _____

S/2 SW/4 16 8

County Ellsworth

Production Zone(s) Topeka

Field Name _____

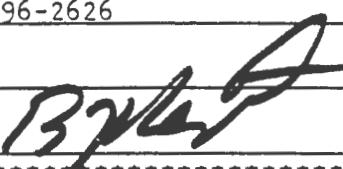
Injection Zone(s) _____

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. 30157 Contact Person: B. J. Reid

Past Operator's Name and Address: Phone: (918) 496-2626

BRG Petroleum, Inc.
7134 S. Yale, Ste 600
Tulsa, OK 74136
Title Executive Vice President Signature 

New Operator's License No. _____ Contact Person _____

New Operator's Name and Address Phone _____

Comanche Production, Inc. Oil/Gas Purchaser _____

Date _____

Title _____ Signature _____

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 _____

TRANSFER OF INJECTION AUTHORIZATION *SKC*
OR TRANSFER OF SURFACE POND PERMIT

CONSERVATION DIVISION
130 S MARKET, ROOM 2078
WICHITA, KANSAS 67202

Check Applicable Boxes:

[] Oil Lease: No. of Wells _____ **

Effective Date of Transfer 1-1-95

[x] Gas Lease: No. of Wells 1 **

Lease Name Hokr #1

** SIDE TWO MUST BE COMPLETED **

Sec 5 T 16 R 8 W/E

[] Saltwater Disposal Well - Docket No. _____

Legal Description of Lease: _____

Spot Location: _____ feet from N/S Line

S/2 SW/4

_____ feet from E/W Line

[] Enhanced Recovery Proj. Docket No. _____

County Ellsworth

Entire project: Yes/No

Production Zone(s) Topeka

Number of injection wells _____ **

Field Name _____

Injection Zone(s) _____

Surface Pond Permit # _____

Feet from N/S Line of Section

(API No. If Drill Pit) _____

Feet from E/W Line of Section

Identify: Emergency Pit

Burn Pit

Storage Pit

Drill Pit

Past Operator's License No. 30157

Contact Person: B. J. Reid

Past Operator's Name and Address:

Phone: (918) 496-2626

BRG Petroleum, Inc.

Date 2-14-95

7134 S. Yale, Ste 600

Signature *Byler*

Tulsa, OK 74136

Title Executive Vice President

Contact Person Mike Wilson

New Operator's License No. 31030

Phone 918/494-0790

New Operator's Name and Address

Oil/Gas Purchaser Gas - Northern Natural

Comanche Production, Inc.

Date 2/16/95

2512-C East 71st Street

Signature *Mike Wilson* Mike Wilson

Tulsa, OK 74136-5575

Title 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 _____

Date _____

Authorized Signature _____

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

Date _____

Authorized Signature _____

FEB 21 1995

Form T1 7/94

P

TO:

STATE CORPORATION COMMISSION
CONSERVATION DIVISION
200 COLORADO DERBY BUILDING
WICHITA, KANSAS 67202-1206

NOTICE OF CHANGE OF OPERATOR
OR
REQUEST TO TRANSFER INJECTION
AUTHORIZATION

Effective Date 06/01/91

Lease Name Hokr #1

County Ellsworth

Producing Zone Topeka

Past Operator's License # 8061

Past Operator's Name and Address

Oil Producers Inc. of Kansas
P.O. Box 8647
2400 N. Woodlawn, Suite 115
Wichita, KS 67208

Title President

New Operator's License 30157

New Operator's Name and Address

BRG Petroleum, Inc.
7134 S. Yale, Ste 600
Tulsa, OK 74136

5 SEC. T 16 S, R 8 W/E

[] Oil Lease; No. of Wells _____

[] Gas Lease; No. of Wells 1

[] Saltwater Disposal Well

[] Enhanced Recovery Project

Docket # _____ (if SWD or ER)

Lease Description S/2 SW/4

Field Name _____

Contact Person Diana Richecky

Phone (316) 681-0231

Oil/Gas Purchaser Northern Natural Gas

Date 6-24-91

Signature John S. Weir

Contact Person B. J. Reid

Phone (918) 496-2626

Oil/Gas Purchaser Northern Natural Gas

Date 6-11-91

Signature B. J. Reid

Title Executive Vice President

FOR COMMISSION USE ONLY WITH INJECTION WELLS

It is acknowledged by the Kansas Corporation Commission that:

is the new operator of the above named well and
may: continue to injection fluid as authorized by Docket # _____.
not inject fluids until the following action is taken.

Administrative Action _____

Technical Review _____

Date _____

Authorized Signature

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 ____ **

Effective Date of Transfer 9/1/98

[X] Gas Lease: No. of Wells 1 **

Lease Name HoKr #1

** SIDE TWO MUST BE COMPLETED **

Sec 5 T 16 R 8 W/8

[] Saltwater Disposal Well - Docket No. _____

Legal Description of Lease: _____

Spot Location: _____ feet from N/S Line _____

S/2 SW/4

feet from E/W Line _____

[] Enhanced Recovery Proj. Docket No. _____

County Ellsworth

Entire project: Yes/No

Production Zone(s) Topeka

Number of injection wells ____ **

Injection Zone(s) _____

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 Drill Pit

Past Operator's License No. 31630

Contact Person: Jack Wheeler

Past Operator's Name and Address:

Comanche Production, Inc.
5900 Masteller Drive, Suite 1900
Oklahoma City, OK 73112

Phone: 405-910-8226

Date 1-29-99

Signature Jack E. Wheeler

New Operator's License No. 31300

Contact Person J. Duston Smith

New Operator's Name and Address

Centrex Operating Company
P.O. Box 52058
Tulsa, OK 74152-0058

Phone 918-599-8128

Oil/Gas Purchaser Aurora Natural Gas

Date 1/29/99

Signature [Signature]

Title President

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_____ 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 7/94

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 _____ **

Effective Date of Transfer 12-1-99

[X] Gas Lease: No. of Wells 1 **

Lease Name HoKu #1

** SIDE TWO MUST BE COMPLETED **

5/4 - SW Sec 5 T 16 R 8 NW

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

Legal Description of Lease: _____

[] Enhanced Recovery Proj. Docket No. _____

County Ellsworth

Entire project: Yes/No

Production Zone(s) Topeka

Number of injection wells _____ **

Field Name _____

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. 31300

Contact Person: J. Dutton Smith

Past Operator's Name and Address:

Centrex Operating Company
5650 S. Lewis, Suite 305
Tulsa, OK 74105

Phone: 918-746-4903

Date 12-1-99

Title President

Signature _____

New Operator's License No. 5047

Contact Person Cindi Inten

New Operator's Name and Address

Rupe Oil Company, Inc.
P.O. Box 783010
Wichita, KS 67278-3010

Phone (316) 699-3520

Oil/Gas Purchaser AURORA

Date 12/20/99 R.M. Rupe

Title PRESIDENT

Signature R.M. Rupe

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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 12-1-99 _____
Authorized Signature _____

Date _____
Authorized Signature _____

Form T1 7/94

MUST BE FILED FOR ALL WELLS

SIDE 2

T1 7/94

*LEASE NAME HOKR #1

*LOCATION: _____

WELL NO.	API NO. (YR DRILLED/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)
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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
more than one section please indicate which section each well is located.