

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:

Effective Date of Transfer 05/31/98

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

Lease Name Strode Gas Unit

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

_____-_____-_____- Sec 28 T 18S R 31W W/E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: All of

[] Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N/S Line

Sec 28 T18S R31W

_____ feet from E/W Line

[] Enhanced Recovery Proj. Docket No. _____

County Scott

Entire project: Yes/No

Number of injection wells _____ **

Production Zone(s) Krider

Field Name Hugoton NE

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. 3857 ✓

Contact Person: Rick L. Hurt

Past Operator's Name and Address:

Phone: (505) 326-2668

Unico, Inc.

Date 05/31/98

1921 Bloomfield Blvd.

Farmington, NM 87401

Title Treasurer (at time of transfer) Signature Rick L. Hurt

New Operator's License No. 32356 ✓

Contact Person Rick L. Hurt

New Operator's Name and Address

Phone (505) 326-2668

Intermountain Refining Co., Inc.

Oil/Gas Purchaser KN Energy Inc.

P.O. Box 35

Date 05/31/98

Farmington, NM 87499

Title Treasurer

Signature Rick L. Hurt

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 _____

*LEASE NAME	Stroke Gas Unit	*LOCATION:	C NE/4 Sec 28 T18S R31W		T1 7/94		SIDE	
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/MSW)	WELL STATUS (PROD/TA'D ABANDONED)				
	15171200690000 ✓	1,320	Circle FSL/FNL	Circle 1,320 FEL/FWL	Gas	Prod		
			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.