REQUEST FOR CHANGE OF OPERATOR SRF
TRANSFER OF INJECTION AUTHORIZATION
OR TRANSFER OF SURFACE POND PERMIT
120104_Brookover.pdf
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KANSAS CORPORATION COMMISSION
CONSERVATION DIVISION
130 S MARKET, ROOM 2078
WICHITA, KANSAS 67202

J.H.

KDOR: 208828

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 Panoma

Effective Date of Transfer 12/01/94

Lease Name Brookover

___-___-___-___ Sec 9 T 28S R 38W W/E

Legal Description of Lease: All of
Section 9, 28S, 38W.

County Grant

Production Zone(s) Council Grove

Injection Zone(s) _____

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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 ☐

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Past Operator's License No. 03228

Past Operator's Name and Address:
Brookover Enterprises
P.O. Box 917
Garden City, KS 67846

Title Vice President

Contact Person: David M. Johnson

Phone: 316-275-9206

Date January 18, 1995

Signature David M. Johnson

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New Operator's License No. 31352

New Operator's Name and Address

Vastar Resources, Inc.
15375 Memorial Drive
Houston, TX 77079

Title Director of Acquisitions

Contact Person Douglas W. Johnson

Phone (713) 584-3244

Oil/Gas Purchaser Greely

Date January 17, 1995

Signature Douglas W. Johnson

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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

RECEIVED
STATE CORPORATION COMMISSION
APR 14 1995
CONSERVATION DIVISION
WICHITA, KANSAS

Form T1 7/94

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MUST BE FILED FOR ALL WELLS

*LEASE NAME Brookover *LOCATION: Section 9, 28S, 38W.

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)
3	15-067-20842 ✓	3820	Circle (FSL)/FNL	4030	Circle (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		
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			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 sheet for each lease. If a lease covers more than one section lease indicate which section each well is located.