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, KS 67202

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Check Applicable Boxes:

[X] Oil Lease: No. of Wells 4 **

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

** SIDE TWO MUST BE COMPLETED **

[X] Saltwater Disposal Well - Docket No. D-26984
Spot Location: 660 feet from N Line
Spot Location: 1980 feet from W Line

[ ] Enhanced Recovery Proj. Docket No. _____
Entire Project: Yes/No
Number of injection wells _____ **

Field Name Victory

Effective Date of Transfer 3/11/98

Lease Name Gaskill

Sec 5 T 31S R 33W

Legal Description of Lease:

County Seward

Production Zone(s) KC A/Marmaton/Morrow/St. Louis

Injection Zone(s) Cedar Hills

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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. 3871

Past Operator's Name and Address

Hugoton Energy Corporation**
**By Chesapeake Operating Inc. as successor by merger
301 N. Main Street, Suite 1900
Wichita, KS 67202

Title Vice President of Operations

Contact Person Frank E. Jordan

Phone 405-848-8000

Date 07/13/98

Signature Frank E Jordan

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New Operator's License No. 32334

New Operator's Name and Address

Chesapeake Operating Inc.
P.O. Box 18496
Oklahoma City, OK 73154

Title Vice President of Operations

Contact Person Frank E. Jordan

Phone 405-848-8000

Oil / Gas Purchaser Cibola Energy / NCRA

Date 07/13/98

Signature Frank E Jordan

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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 record 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

EPR

MUST BE FILED FOR ALL WELLS

* LEASE NAME GASKILL

* LOCATION: SEC 5-31S-33W

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/WSE)	WELL STATUS (PROD/TA'D ABANDONED)
1-5	15-175-21301-0001	660	FNL	660	FWL	OIL	PROD
2-5	15-175-21387	660	FNL	1980	FWL	SWD	
3-5	15-175-21464-0001	330	FNL	2310	FEL	OIL	PROD
4-5	15-175-21482-0001	1650	FNL	2310	FEL	OIL	PROD
5-5	15-175-21517-0001	2310	FSL	2310	FEL	OIL	PROD
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
KDOR #			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
1-5 132456	218792		FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
3-5 134790	220397		FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
4-5 134791	220748		FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
5-5 134792	220849		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.