Kansas Corporation Commission Oil & Gas Conservation Division

Form T-1 June 2000 Form must be Typed Form must be Signed All blanks must be Filled

REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE POND PERMIT

VUR 201654	Effective Date of Transfer: January 1, 2001
Check Applicable Boxes:	
Oil Lease: No. of Wells**	Lease Name: Hoffman
Gas Lease: No. of Wells**	Sec. 19 Twp. 30 R. 32 FVW
** Side Two Must Be Completed.	Legal Description of Lease: All of Sec. 19, Twp. 30S, R32W
Saltwater Disposal Well - Docket No.	Legal Description of Lease:
Spot Location:feet from N / S Line	
feet from E / W Line	
Enhanced Recovery Project Docket No.	County: Haskell
Entire Project: Yes No	Production Zone(s): Hugoton
Number of Injection Wells**	
Field Name: Hugoton	Injection Zone(s):
	feet from N / S Line of Section
Surface Pond Permit #(API # If Drill Pit)	\wedge
	feet from E / W Line of Section
Identify: Emergency Pit Burn Pit	Storage Pit Drill Pit
Past Operator's License No. 5269	Contact Person: Alan R. Hoffman
Past Operator's Name & Address: Kansas Natural Gas, Inc.	Phone: 785-625-7353
Past Operator's Name & Address:	Date:
Title: Vice-President	Signature: Wax T. Hoffman
New Operator's License No. 32787	Contact Person: Alan R. Hoffman
New Operator's Name & Address: Kansas Natural Gas	Phone: 785-625-7353
Operating Inc., P. O. Box 818, Hays, Kansas 67601	Oil / Gas Purchaser: Amoco
	Date: June 5, 2001
Title: Vice-President	(llay) to dellarge
Title: Vice-Flesident	Signature: Cuch 1. Software
	<u> </u>
Acknowledgment 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 Corpo	oration Commission. This acknowledgment of transfer pertains to Kansas
Corporation Commission records only and does not convey any ownership	p interest in the above injection well(s) or pond permit.
:	is acknowleged as the
is acknowleged as the	new operator of the above named lease containing the containing th
new operator and may continue to inject fluids as authorized by	new operator of the above named lease containing the last the KANSAS CORPORATION COMMISSION COMMISS
Docket # Recommended action:	permitted by #
	HIN 1 Z non
Date:	JUN 1 3 2001
Authorized Signature	Authorized Signature

Must Be Filed For All Wells

* Lease Name:	Hoffman		*	* Location: Sec. 19-30S-32W		
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)	
1-2	15-081-20,755	1250' Circle	2680' Circle	GAS	PROD	
		FSL/FNL	FEL/FWL			
		FSL/FNL	———FEL/FWL			
-						
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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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 covers more than one section please indicate which section each well is located.