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

DOR 222458

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

Check Applicable Boxes:

03/31/01 **Effective Date of Transfer**

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

[X] **Gas Lease: No. of Wells** 1 ******
**** SIDE TWO MUST BE COMPLETED ****

Lease Name Theis

_ - _ - SW - NW **Sec** 17 **T** 35S **R** 25W **W/E**

Legal Description of Lease: SW NW

[ ] **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 _____ ******

County Clark

Production Zone(s) Chester

Field Name McKinney

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 ☐ KBR

Past Operator's License No. 32350

Past Operator's Name and Address:
Gothie Production Corp.
5725 S. Lewis Ave., Suite 700
Tulsa, OK 74105
Title Sr. Vice-President - Land & Legal

Contact Person: Henry J. Hood

Phone: (405) 848-8000

Date 03/29/2001

Signature _____

New Operator's License No. 32334

New Operator's Name and Address
Chesapeake Operating, Inc.
P. O. Box 18496
Oklahoma City, OK 73154-0496

Contact Person Henry J. Hood

Phone (405) 848-8000

Oil/Gas Purchaser _____

Date 03/29/2001

Title Sr. Vice-President - Land & Legal

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

Form T1 7/94

Spot 6/3/2003 JUN 0 4 2003 UIC 6/4/03

MUST BE FILED FOR ALL WELLS

SIDE 2

SCANNED

T1 7/94

*LEASE NAME Theis

*LOCATION Sec. 17-35S-25W

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)
			Circle		Circle		
3-17	15-025-21121 ✓	660	FSL/FNL	1980	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		

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.