## 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

| Check Applicable Boxes:   | Effective Date of Transfer: August 2, 2001                         |  |  |
|---|--|--|--|
| Oil Lease: No. of Wells***  |  |  |  |
| Gas Lease: No. of Wells 1 **  | Lease Name: Burnett  |  |  |
| ** Side Two Must Be Completed.                                      | Sec. 13 Twp. 23S R. 37   |  |  |
| Saltwater Disposal Well - Docket No.                                | Legal Description of Lease: Sec. 13-T23S-R37W                      |  |  |
| Spot Location: feet from N / S Line                                 |  |  |  |
| feet from E / W Line  |  |  |  |
| Enhanced Recovery Project Docket No.                                | Kogray   |  |  |
| Entire Project: Yes No  | County: Kearny   |  |  |
| Number of Injection Wells**   | Production Zone(s): Chase  |  |  |
| Field Name: Hugoton   | Injection Zone(s): None  |  |  |
| Surface Pond Permit #   | feet from N / S Line of Section                                    |  |  |
| (API # II Orill PII)  | feet from E / W Line of Section                                    |  |  |
| Identify: Emergency Pit Burn Pit                                    | Storage Pit Drill Pit  |  |  |
| Past Operator's License No. 32824                                   | Contact Person: Wayne King   |  |  |
| Past Operator's Name & Address: Barrett Resources Corporation       | Phone: 620-355-7838  |  |  |
| P.O. Box 383 Lakin, KS. 67860                                       | Date: August 30, 2001  |  |  |
| Title: District Manager   |  |  |  |
| Tide:   | _ Signature: Clayne K  |  |  |
| New Operator's License No. 32909                                    | Contact Person: Don K. Wilken                                      |  |  |
| New Operator's Name & Address:                                      | Phone: 620-355-7838  |  |  |
| Williams Production RMT Company                                     | Oil / Gas Purchaser: Oneok RECEIVEL                                |  |  |
| P.O. Box 383 Lakin, KS. 67860                                       | Data: August 30, 2001  |  |  |
| Title: Engineering Technician                                       | An Waith OLF T. 1 200  |  |  |
|   | Signature: WON K. TUNES. KCC WECHTS                                |  |  |
| Acknowledgment of Transfer: The above request for transfer of injec | tion authorization, surface pond permit #h                         |  |  |
| noted, approved and duly recorded in the records of the Kansas Co   | orporation Commission. This acknowledgment of transfer pertains to |  |  |
| Corporation Commission records only and does not convey any owner   | rehip interest in the above injection well(s) or pond permit.      |  |  |
| is acknowleged as the   |  |  |  |
| new operator and may continue to inject fluids as authorized b      | is domowings   |  |  |
| Docket # Recommended action:  |  |  |  |
|   | _  |  |  |
| Date:Authorized Signature   | Date:  |  |  |
| AUTOTIZEO SIGNATURE   | Authorized Signature   |  |  |



## Must Be Filed For All Wells

| * Lease Name: | Burnett                                 | * Location: Section 13-T23S-R37W                               |             |                                   |  |  |
|---------------|---|--|-------------|-----------------------------------|--|--|
| Well No.      | API No.<br>(YR DRLD/PRE '67)            | Foolage from Section Line<br>(i.e. FSL = Feet from South Line) |             | Type of Well<br>(Oil/Gas/INJ/WSW) | Well Status<br>(PROD/TA'D/Abandoned)   |  |
| 1             | 15-093-00162 V<br>1954                  | 1320 Chole   | 1320 FELFWL | Gas                               | Prod                                   |  |
| <del></del>   |   | FSL/FNL  | FEL/FWL     |                                   |  |  |
|               |   | FSL/FNL  | FEL/FWL     |                                   |  |  |
|               |   | FSL/FNL  | FEL/FWL     |                                   |  |  |
| ····          |   | FSL/FNL  | FEL/FWL     |                                   |  |  |
|               |   | FSL/FNL  | FEL/FWL     |                                   |  |  |
| <u> </u>      | ·                                       | FSL/FNL  | FEL/FWL     |                                   |  |  |
|               |   | FSL/FNL  | FEL/FWL     |                                   |  |  |
|               |   | FSL/FNL  | FEL/FWL     |                                   |  |  |
| <del></del>   |   | FSL/FNL  | FEL/FWL     |                                   |  |  |
|               |   | F\$L/FNL   | FEL/FWL     |                                   | <del></del>                            |  |
|               |   | FSL/FNL  | FEL/FWL     |                                   |  |  |
|               | - · · · · · · · · · · · · · · · · · · · | FSL/FNL  | FEL/FWL     |                                   |  |  |
|               |   |  |             | -                                 |  |  |
|               |   |  |             |                                   |  |  |
|               |   |  |             |                                   | ······································ |  |
|               |   |  |             |                                   | -                                      |  |
|               |   | FSL/FNL .  |             |                                   |  |  |
|               |   |  | FEL/FWL     |                                   |  |  |
|               |   | FSL/FNL  |             |                                   |  |  |
|               |   | FSL/FNL  |             |                                   |  |  |
|               |   |  |             |                                   |  |  |
|               |   | FSL/FNL .  |             |                                   |  |  |
|               |   | FSL/FNL  | FEL/FWL     |                                   |  |  |

A separate sheet may be attached if necessary

<sup>\*</sup> 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.