KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

Form T1
June 2000
Form must be Typed
Form must be Signed
All blanks must be Filled

11/1/01 Check Applicable Boxes: Effective Date of Transfer:. Oil Lease: No. of Wells. Lease Name:__ ✓ Gas Lease: No. of Wells _ -____ Sec. 20 Twp. 22S R 41 EVW ** Side Two Must Be Completed. Saltwater Disposal Well - Docket No. Legal Description of Lease:_ feet from N / S Line All of Section 20-22S-41W feet from E / W Line Enhanced Recovery Project Docket No .__ County: Hamilton Entire Project: Yes No Production Zone(s):___ Chase Number of Injection Wells __ Field Name: Bradshaw Injection Zone(s):____ Surface Pond Permit #_ __ feet from N / S Line of Section (API # If Drill Pit) feet from E / W Line of Section Identify: Emergency Pit Burn Pit Storage Pit Drill Pit Contact Person: Lenora Sawyer Past Operator's License No. ___ Phone:_405-748-2725 Past Operator's Name & Address: Louis Dreyfus Natural Gas Corp Date: _10/31/01 14000 Quail Springs Parkway - Okla. City, OK 73134 Title: Paul Dargen, Purchasing/Production Manager Signature: Contact Person: Lenora Sawyer New Operator's License No. . Phone: 405-748-2725 New Operator's Name & Address: Dominion Oklahoma Texas Exploration & Production, Inc. Oneok Field Services Oil / Gas Purchaser: 14000 Quail Springs Parkway - Okla. City, OK 73134 Title: David J. McBride, Director, EH&S Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pond permit # ____ noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment 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 acknowleged as the is acknowleged as the new operator and may continue to inject fluids as authorized by new operator of the above named lease containing the surface pond _____. Recommended action:__ permitted by # ___ Date:. Authorized Signature Authorized Signature 3/28/02 HAR, 28 2002 3/02

Must Be Filed For All Wells

* Lease Name:	HCU 2021	* Location: Section 20-22S-41W			
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)
2021	15-075-1006700 (1964)	Circle. 1980' FSL FNI 1980	Circle D' FEL/FWL)	Gas	Prod
2021-B	15-075-2058900	1250' (FSI) FNL 1250)'FELJFWL	Gas	Prod
		FSL/FNL	FEL/FWL _		44.
		FSL/FNL	FEL/FWL	<u> </u>	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		MARINE .
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		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. It a lease covers more than one section please indicate which section each well is located.