

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, KANSAS 67202

DEC 12 2001

Check Applicable Boxes:

☐ Oil Lease: No. of Wells _____

☒ Gas Lease: No. of Wells 1

*** SIDE TWO MUST BE COMPLETED ***

☐ 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 _____

Field Name PANOMA

Surface Pond Permit # _____
(API No. If Drill Pit)

Identify: Emergency Pit ☐ Burn Pit ☐ Storage Pit ☐ Drill Pit ☐

Past Operator's License No. 31352

Past Operator's Name and Address
VASTAR RESOURCES, INC.
15375 MEMORIAL DRIVE
HOUSTON, TX 77079
Title STAFF ASSISTANT

New Operator's License No. 5952

New Operator's Name and Address
AMOCO PRODUCTION COMPANY
P. O. BOX 3092, ROOM 3.329
HOUSTON, TX 77253-3092
Title STAFF ASSISTANT

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

3/19/02 MAR 20 2002 JIC 3/02

_____ is acknowledged as the new
operator of the above named lease containing _____ the
surface pond permitted by # _____

Date _____
Authorized Signature

Effective Date of Transfer 12/31/01

Lease Name SULLIVAN

_____ - NW - SE - SW Sec 26 T 28S R 37W W/E

Legal Description of Lease: SW/4 OF SEC 26-28S

_____ -37W

County GRANT

Production Zone(s) COUNCIL GROVE

Injection Zone(s) _____

_____ Feet from N/S Line of Section

_____ Feet from E/W Line of Section

Contact Person: SUE SELLERS

Phone (281)366-2052

Date 11/30/01

Signature [Signature]

Contact Person: SUE SELLERS

Phone (281)366-2052

Oil/Gas Purchaser BP ENERGY-DRY GAS/DUKE ENERGY-NGLS

Date 11/30/01

Signature [Signature]

MUST BE FILED FOR ALL WELLS

* LEASE NAME SULLIVAN

* LOCATION: SEC 26-289-37W

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/T/A/D
ABANDONED)

2 _____ 15-067-10015-0000 ✓

Circle Circle
1250 S FSL/FNL 1500 W 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

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FSL/FNL FEL/FWL



*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.

A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY