

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

00R 204176

RECEIVED

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

DEC 12 2001

Check Applicable Boxes:

☐ Oil Lease: No. of Wells _____

** CONSERVATION DIVISION
WICHITA, KS

Effective Date of Transfer 12/31/01

Lease Name WILSON UNIT

☒ Gas Lease: No. of Wells 1

**

- - - - - C Sec 14 T 27S R 40W W/E

** SIDE TWO MUST BE COMPLETED **

☐ Saltwater Disposal Well - Docket No. _____

Legal Description of Lease: SW/4 S14-27S-40W

Spot Location: _____ feet from N/S Line

_____ feet from E/W Line

☐ Enhanced Recovery Proj. Docket No. _____

County STANTON

Entire project: Yes ☐ No ☐

Number of injection wells _____ **

Production Zone(s) CHASE

Field Name HUGOTON

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 SR

Identify: Emergency Pit ☐

Burn Pit ☐

Storage Pit ☐

Drill Pit ☐

Past Operator's License No. 31352

Contact Person: SUE SELLERS

Past Operator's Name and Address

VASTAR RESOURCES, INC.

15375 MEMORIAL DRIVE

HOUSTON, TX 77079

Title STAFF ASSISTANT

Phone (281)366-2052

Date 11/30/01

Signature Sue Sellers

New Operator's License No. 5952

Contact Person: SUE SELLERS

New Operator's Name and Address

AMOCO PRODUCTION COMPANY

P. O. BOX 3092, ROOM 3.329

HOUSTON, TX 77253-3092

Title STAFF ASSISTANT

Phone (281)366-2052

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

Date 11/30/01

Signature Sue Sellers

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

SPAR 3/19/02 PRO MAR 20 2002 3/02

MUST BE FILED FOR ALL WELLS

SIDE 2
T1 7/94

* LEASE NAME WILSON UNIT

* LOCATION: SEC 14-27S-40W

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/MSW)

WELL STATUS
(PROD/TAP
ABANDONED)

1 15-187-00150-0000

Circle Circle
2640 N FSL/FNL 2640 E 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