

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

Check Applicable Boxes:

☐ Oil Lease: No. of Wells _____ **

☒ Gas Lease: No. of Wells 1 **

** SIDE 2 MUST BE COMPLETED **

☐ Saltwater Disposal Well - Docket No. _____
Spot Location: _____ feet from /S Line
_____ feet from /W Line

☐ Enhanced Recovery Proj. - Docket No. _____
Entire project: Yes/No
Number of injection wells _____ **

Field Name Spivey-Grabs

Surface Pond Permit No. _____

(API No. if Drill Pit)

Identify: Emergency Pit ☐ Burn Pit ☐

Feet from N/S Line of Section _____
Feet from E/W Line of Section _____
Storage Pit ☐ Drill Pit ☐

Past Operator's License No. 31378

Past Operator's Name and Address:

Questar Exploration and Production Company

2601 Northwest Expressway, Suite 700E

Oklahoma City, Oklahoma 73112

Title Coordinator, Admin Services

Contact Person: Bob Driver

Phone: 405-840-2761

Date: 12/23/99

Signature: Bob Driver

New Operator's License No. 31566

New Operator's Name and Address:

Benchmark Oil & Gas Corporation

1515 Arapahoe Street, Suite 580

Denver, Colorado 80202

Title: President

Contact Person: Jay Johnson

Phone: (303) 595-9251

Oil/Gas Purchaser: _____

Date: 12/30/99

Signature: Jay Johnson

ACKNOWLEDGEMENT OF TRANSFER: The above request for transfer of injection authorization, surface pond permit No. _____ 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.

RECEIVED
STATE CORPORATION COMMISSION

_____ is
acknowledged as the new operator and may continue to
inject fluids as authorized by Docket No. _____.
Recommended action _____

_____ is acknowledged as the new operator of the above
named lease containing the surface pond permitted by No. _____
Wichita, Kansas

Date: _____
Authorized Signature

Date: _____
Authorized Signature

EP&R 3/13/2000 PROD APR 7 2000 3-16-00

Form T1 7/94

*LEASE NAME	Muir E	*LOCATION	SE Sec 21, T31S, R9 W
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*** LOCATION SE Sec 21, T31S, R9 W**

**WELL STATUS
(PROD/TA'D
ABANDONED)**

TYPE OF WELL
(OIL/GAS
INJ/WSW)

**FOOTAGE FROM SECTION LINE
(i.e. FSL = Feet from South Line)**

APII NO.

WELL NO. (YR DRLD/PRE '67)

15-077-20097

2310

Circle
FSL/FNL

23,0

**Circle
FEL/FWL**

Gas

Prod

**Circle
FSL/FNL**

**Circle
FEL/FWL**

**Circle
ESL/FNL**

**Circle
FEL/FWL**

Circle
ESI/ENI

Circle
FEL/FWL

Circle
ESI/ENI

Circle
FBI/FWI

Circle
ESI/ENI

Circle
FEI /EWI

Circle
ESI/ENI

Circle
FEI /EWI

Circle
ESI/ENI

Circle
EEI /EWI

Circle
FBI/FNI

Circle
FFI / FWI

Circle

Circle

SHEET 1

IF NECESSARY

A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

*** When transferring a unit which consists of more than one lease, please file a separate Side 2 for each lease. If a lease covers more than one section, please indicate which section each well is located.**