

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:

Effective Date of Transfer 01/01/98

[] Oil Lease: No. of Wells _____ **

Lease Name DAVIES #2

[X] Gas Lease: No. of Wells 1 **

- -SW - Sec 06 T 34S R 31 (W)/E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: _____

[] Saltwater Disposal Well - Docket No. _____
Spot Location: _____ feet from N/S Line

1250' FSL & 1250' FWL

_____ feet from E/W Line

[] Enhanced Recovery Proj. Docket No. _____

County SEWARD

Entire project: Yes/No

Number of injection wells _____ **

Production Zone(s) LOWER MORROW

Field Name ARKALON

Injection Zone(s) _____

Surface Pond Permit # _____ Feet from N/S Line of Section
(API No. If Drill Pit) _____ Feet from E/W Line of Section

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

Past Operator's License No. 30481 Contact Person: JIM BYERS

Past Operator's Name and Address:

Phone: (316) 532-2390

APOLLO ENERGIES, INC.

Date 6-1-98

RT. 1 BOX 60

Signature Jim Byers

KINGMAN, KANSAS 67068

Title President

New Operator's License No. 4549 if ok per rec'd Contact Person G. B. SMITH

New Operator's Name and Address

Phone (316) 624-6253

ANADARKO PETROLEUM CORPORATION

Oil/Gas Purchaser ANADARKO ENERGY SERVICES

P.O. BOX 351

Date 06/19/98

LIBERAL, KANSAS 67905

Signature G. B. Smith

Title DIVISION OPERATIONS MANAGER

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 _____

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

Date _____
Authorized Signature _____

Date _____
Authorized Signature _____

Form T1 7/94

EPR

T1 7/94

*LEASE NAME DAVIES *LOCATION: 06-34S-31W

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. If a lease covers more than one section please indicate which section each well is located.