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

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Check Applicable Boxes:

Effective Date of Transfer 1-20-00

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

Lease Name   LOFLAND

[X] Gas Lease: No. of Wells   1   **
** SIDE TWO MUST BE COMPLETED **

c - NE-NE - SW Sec 14 T 35 R 32 (W) E

[ ] 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 _____**

Legal Description of Lease: _____

c NE SW Sec. 14-35S-32W

County   SEWARD

Field Name _____

Production Zone(s)   MORROW

Injection Zone(s) _____

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

_____ Feet from N/S Line of Section
_____ Feet from E/W Line of Section

Identify: Emergency Pit [ ]   Burn Pit [ ]   Storage Pit [ ]   Drill Pit [ ]

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Past Operator's License No.   31532   Contact Person: JANNA CALHOUN

Past Operator's Name and Address:
  MIDDLE BAY PRODUCTION COMPANY, INC.
  9320 EAST CENTRAL
  WICHITA, KS   67206
Title Operations Admin

Phone: (713) 821-7107

Date   1-20-00

Signature   Janna Calhoun

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New Operator's License No.   82506   Contact Person   JANNA CALHOUN

New Operator's Name and Address
  3TEC ENERGY CORPORATION
  777 WALKER,   SUITE 2400
  HOUSTON, TX   77002

Phone   (713) 821-7107

Oil/Gas Purchaser   Centanna Gathering CO.

Date   1-20-00

Title Operations Admin

Signature   Janna Calhoun

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ACKNOWLEDGEMENT OF TRANSFER: The above request for transfer of injection authorization,
surface pond permit # _____ has been noted, approved and duly recorded in the record
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   _____ is acknowledged as the
as the new operator and may continue to new operator of the above named lease containing
inject fluids as authorized by Docket # the surface pond permitted by # _____
_____. Recommended action

RECEIVED
KANSAS CORPORATION COMMISSION

Date _____   MAR 02 2000   Date _____
     _____   _____
     Authorized Signature   CONSERVATION DIVISION   Authorized Signature
                                            WICHITA, KS
EP&R 4/11/2000 PRO MAY 9 2000 4-27-00   Form T1 7/54

*LEASE NAME___LOFLAND___   *LOCATION: c-NE-NE-SW   Sec. 14-35S-32W

WELL NO	API NO (YR DRLD/PRE'67)	FOOTAGE FROM SEC. LINE (i.e. FSL= feet from south line)		TYPE OF WELL (Oil/Gas Inj/WSW)	WELLSTATUS (Prod/TA'D Abandoned)
		Circle FSL/FNL	Circle FEL/FWL		
1-14	'15-175-20428	2310	2310	Gas	Prod

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.