TRANSFER OF INJECTION AUTHORIZATION OR TRANSFER OF SURFACE POND PERMIT	CONSERVATION DIVISION 130 S MARKET, ROOM 2078 WICHITA, KANSAS 67202		
Check Applicable Boxes:	Effective Date of Transfer <u>3/9/00</u>		
Oil Lease: No. of Wells**	Lease Name <u>UNION 1-4</u>		
[X] Gas Lease: No. of Wells 1 ** ** SIDE TWO MUST BE COMPLETED **			
☐ ☐ Saltwater Disposal Well - Docket No.	Legal Description of Lease:		
Spot Location: feet from N/S Line feet from E/W Line	All of SEC 4-34S-42W		
☐ ☐ Enhanced Recovery Proj. Docket No Entire project: ☐ Yes ☐ No	County MORTON		
Number of injection wells**	Production Zone(s) TOPEKA (2537-3186')		
Field Name GREENWOOD	Injection Zone(s)		
Surface Pond Permit #(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 D		
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Past Operator's License No. <u>6593</u> Past Operator's Name and Address COASTAL OIL AND GAS CORPORATION NINE GREENWAY PLAZA HOUSTON, TX 77046-0995 Title <u>VICE PRESIDENT</u>	Phone 713-877-7803 STATE CORPORATION COMMISSION Date 3/8/00 MAR 2 7 2000 Signature CANSERVATION DIVISION Withits Kanses		
New Operator's License No. <u>9953</u>	Contact Person: W. G. HARRIS, III		
New Operator's Name and Address HARRIS OIL AND GAS COMPANY 1125 SEVENTEETH ST., SUITE 2290 DENVER, CO 80202 Title PRESIDENT	Phone 303-293-8838 Oil/Gas Purchaser CIG Merchant Company PORATION COMMISSI Date 3 13 2000 Signature 4 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		
ACKNOWLEDGEMENT OF TRANSFER: The above surface pond permit # has be of the Kansas Corporation Commission. The contraction of the contraction commission is the contraction of the contraction commission.	request for transfer of injection/SE authorization, een noted, approved and duly recorded in the records as acknowledgement of transfer pertains to Kansas es not convey any ownership interest in the above		
as the new operator and may continue to	is acknowledged as the new operator of the above named lease containing the surface pond permitted by #		
Date Authorized Signature	DateAuthorized Signature		

MUST BE FILED FOR ALL WELLS

* LEASE NAME <u>UNION 1-4</u>		* LOCATION:	CONTACT		
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/TA'D ABANDONED)
1-4	15-129-10371	2970 FSLIFNL	2970 Circle	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		
·		FSL/FNL _	FEL/FWL		
		FSL/FNL _	FEL/FWL		
		FSL/FNL _	FEL/FWL		
3		FSL/FNL _	FEL/FWL		
<u></u>		FSL/FNL _	FEL/FWL		
		FSL/FNL	FEL/FWL	-	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

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.