

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 TWO MUST BE COMPLETED **

☐ 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 _____ **

Field Name GREENWOOD

Effective Date of Transfer 3/9/00

Lease Name STUCKEY A 1-24

_____ - _____ - _____ Sec 24 T 32SR 42 W/E

Legal Description of Lease: S/2 SEC. 13: &

W/2 SEC. 24-32S-42W

County MORTON

Production Zone(s) TOPEKA

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

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

Past Operator's License No. 6593

Contact Person: JOHN T. ELZNER

RECEIVED
STATE CORPORATION COMMISSION

Past Operator's Name and Address
COASTAL OIL AND GAS CORPORATION
NINE GREENWAY PLAZA
HOUSTON, TX 77046-0995
Title VICE PRESIDENT

Phone 713-877-7803

Date 3/8/00

Signature _____

MAR 27 2000

CONSERVATION DIVISION
WICHITA, KANSAS

New Operator's License No. 9953

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

Phone 303-293-8838

Oil/Gas Purchaser CIG Merchant Company

Date 3/13/2000

Signature W.G. Harris

RECEIVED
KANSAS CORPORATION COMMISSION

MAY 11 2000

CONSERVATION DIVISION
WICHITA, KANSAS

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 _____

MUST BE FILED FOR ALL WELLS

* LEASE NAME STUCKEY A 1-24

* LOCATION: 1320

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)
<u>1-24</u>	<u>15-129-10080</u>	<u>3960</u> <u>FSL/FNL</u> <u>1320</u> <u>FEL/FWL</u>	<u>GAS</u>	<u>PROD</u>
		<u>FSL/FNL</u> <u>FEL/FWL</u>		
		<u>FSL/FNL</u> <u>FEL/FWL</u>		
		<u>FSL/FNL</u> <u>FEL/FWL</u>		
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		<u>FSL/FNL</u> <u>FEL/FWL</u>		
		<u>FSL/FNL</u> <u>FEL/FWL</u>		

A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

*When transferring a unit which consists of more than one section please indicate which section each well is located. If a lease covers more than one section please indicate which section each well is located.