TRANSFER OF INJECTION AUTHORIZATION CONSERVATION DIVISION OR TRANSFER OF SURFACE POND PERMIT **130 S MARKET, ROOM 2078** WICHITA, KS 67202 ********* Check Applicable Boxes: **Effective Date of Transfer** 3/11/98 ***NAME CHANGE REQUEST Oil Lease: No. of Wells Lease Name Boles ON PAGE 2 [X] Gas Lease: No. of Wells NW NW NE Sec 26 T 32S R 35W ** SIDE TWO MUST BE COMPLETED ** Legal Description of Lease: [] Saltwater Disposal Well - Docket No. feet from N/S Line Spot Location: **Spot Location:** feet from E/W Line Enhanced Recovery Proj. Docket No. County Stevens **Entire Project:** Number of injection wells Production Zone(s) Chester Field Name **Boles** 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. 3871 🕢 Contact Person Frank E. Jordan Past Operator's Name and Address 405-848-8000 Phone **Hugoton Energy Corporation**** **By Chesapeake Operating Inc. as successor by merger Date 07/13/98 301 N. Main Street, Suite 1900 Wichita, KS 67202 Vice President of Operations Signature New Operator's License No. 32334 Contact Person Frank E. Jordan New Operator's Name and Address Phone 405-848-8000 Chesapeake Operating Inc. Oil / Gas Purchaser Cibola Energy Services P.O. Box 18496 Oklahoma City, OK 73154 07/13/98 Date Vice President of Operations Signature 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 the new as operator and may continue to new operator of the above named lease containing inject fluids Docket as authorized by the surface pond permitted . Recommended action # Date Date

Authorized Signature

KANSAS CORPORATION COMMISSION

REQUEST FOR CHANGE OF OPERATOR

Form T1 7/94

Authorized Signature

MUST BE FILED FOR ALL WELLS

* LEASE NAME	Boles		* LOCATION: NWI	NW NW NE 26 32S 35W	
	Character and a			TYPE OF WELL	WELL STATUS
WELL NO	(YR DRLD/PRE '67)	(i.e. FSL=Feet from South Line)	SECTION LINE om South Line)	(OIL/GAS INJ/WSE)	(PROD/TA'D ABANDONED)
*** 1-2	15-189-20662	330 FNL	2310 FEL	gas	Prod
		FSL/FNL	FEL/FWL		
*** NAME CHANGE TO:	ro: Boles #1-26	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		
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		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.