Check Applicable Boxes: [] Oil Lease: No. of Wells [X] Gas Lease: No. of Wells ** SIDE TWO MUST BE COMPLETED ** [] Saltwater Disposal Well - Docket No. Spot Location: Spot Location: [] Enhanced Recovery Proj. Docket No. Entire Project: Number of injection wells ** Field Name Cave West ***********************************	WICHITA, KS 67202 Effective Date of Transfer 3/11/98 Lease Name O G Hinshaw Estate SW NE Sec 18 T 31S R 35W Legal Description of Lease: County Stevens Production Zone(s) ***********************************
[] Oil Lease: No. of Wells	Lease Name O G Hinshaw Estate SW NE Sec 18 T 31S R 35W Legal Description of Lease: County Stevens Production Zone(s) Morrow Injection Zone(s)
[X] Gas Lease: No. of Wells 1 ** *** SIDE TWO MUST BE COMPLETED ** [] Saltwater Disposal Well - Docket No.	SW NE Sec 18 T 31S R 35W Legal Description of Lease: County Stevens Production Zone(s) Morrow Injection Zone(s)
*** SIDE TWO MUST BE COMPLETED ** [] Saltwater Disposal Well - Docket No.	Legal Description of Lease: County Stevens Production Zone(s) Morrow Injection Zone(s)
Spot Location: Spot L	Production Zone(s)
[] Enhanced Recovery Proj. Docket No. Entire Project: Number of injection wells ** Field Name Cave West ************************************	Production Zone(s) Injection Zone(s)
Field Name Cave West ***********************************	*************
Surface Pond Permit # (API No. If Drill Pit) Identify: Emergency Pit Burn Pit Past Operator's License No. 3871 Past Operator's Name and Address Hugoton Energy Corporation**	
Past Operator's License No. 2871 Past Operator's Name and Address Hugoton Energy Corporation**	Feet from E/W Line of Section
Past Operator's License No. 3871 Past Operator's Name and Address Hugoton Energy Corporation**	Storage Pit Drill Pit D
Hugoton Energy Corporation**	Contact Person Frank E. Jordan
	Phone 405-848-8000
**By Chesapeake Operating Inc. as successor by merger 301 N. Main Street, Suite 1900 Wichita, KS 67202	Date 07/13/98
	Signature Frank & Jordan
	Contact Person Frank E. Jordan
New Operator's Name and Address	Phone 405-848-8000
Chesapeake Operating Inc. P.O. Box 18496	Oil / Gas Purchaser
	Date 07/13/98
Title Vice President of Operations	Signature Frank & Jordan
ACKNOWLEDGEMENT OF TRANSFER: The above request for	transfer of injection authorization surface pond permit the record of the Kansas Corporation Commission. This
	is acknowledged as the
inject fluids as authorized by Docket #	new operator of the above named lease containing
DateAuthorized Signature	the surface pond permitted by #

KANSAS CORPORATION COMMISSION

REQUEST FOR CHANGE OF OPERATOR



Form T1 7/94

MUST BE FILED FOR ALL WELLS

SW NE 18 31S 35W * LOCATION: O G Hinshaw Estate * LEASE NAME

API NO	FOOTAGE FROM SECTION LINE	ECTION LINE	TYPE OF WELL (OIL/GAS	WELL STATUS (PROD/TA'D
	(i.e. FSL=Feet from South Line)	South Line)	INJ/WSE)	ABANDONED)
	3300 FSL	2020 FEL	gas	Prod
1	FSL/FNL	FEL/FWL		
1	FSL/FNL	FEL/FWL		
1	FSL/FNL	FEL/FWL		
1	FSL/FNL	FEL/FWL		
T .	FSL/FNL	FEL/FWL		
r i	FSL/FNL	FEL/FWL		
ı	FSL/FNL	FEL/FWL		
1	FSL/FNL	FEL/FWL		
	FSL/FNL	FEL/FWL		
1	FSL/FNL	FEL/FWL		
1	FSL/FNL	FEL/FWL		
	FSL/FNL	FEL/FWL		
1	FSL/FNL	FEL/FWL		
ì	FSL/FNL	FEL/FWL		
1	FSL/FNL	FEL/FWL		
1	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.