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, KS 67202
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Check Applicable Boxes:	Effective Date of Transfer 3/11/98
Oil Lease: No. of Wells	Lease Name Overton #2
[ X ] Gas Lease: No. of Wells 1 **  ** SIDE TWO MUST BE COMPLETED **	C NW SE         Sec         21         T 24S         R 40W           Legal Description of Lease:
Spot Location:  Spot Location:	
[ ] Enhanced Recovery Proj. Docket No. Entire Project:	County Hamilton
Number of injection wells **	Production Zone(s) Winfield
Field Name	
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 D
**************************************	Contact Person Frank E. Jordan 8-11-98
Past Operator's Name and Address	Phone 405-848-8000
Hugoton Energy Corporation**  **By Chesapeake Operating Inc. as successor by merger 301 N. Main Street, Suite 1900  Wichita, KS 67202	Date 07/13/98
Title Vice President of Operations	Signature Trans & landar
****************	Contact Person Frank E. Jordan
New Operator's License No. 32334	111
New Operator's Name and Address	Phone 405-848-8000
Chesapeake Operating Inc. P.O. Box 18496	Oil / Gas Purchaser Warren Energy Resources
Oklahoma City, OK 73154	Date 07/13/98
Title Vice President of Operations	Signature Frank Jorda
**************************************	for transfer of injection authorization surface pond permit in the record of the Kansas Corporation Commission. This
acknowledgement of transfer pertains to Kansas Corporation Co interest in the above injection well(s) or pond permit.	mmission records only and does not convey any ownership
is acknowledged	is acknowledged as the
as the new operator and may continue to inject fluids as authorized by Docket # Recommended action	new operator of the above named lease containing the surface pond permitted by #
Date	Date
Authorized Signature	Authorized Signature

Form T1 7/94

## MUST BE FILED FOR ALL WELLS

* LEASE NAME OV WELL NO (YR 2	API NO (YR DRLD/PRE '67) 15-075-20274	*LOCATION:  FOOTAGE FROM SECTION LINE  (i.e. FSL=Feet from South Line)  1980 FSL  FSL/FNL  FS		C NW SE 21 24S 40W  TYPE OF WELL (OIL/GAS INJ/WSE)  WL	WELL STATUS (PROD/TA'D ABANDONED) Prod
		FSL/FNL FSL/FNL FSL/FNL	FEL/FWL FEL/FWL		

## A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

<sup>\*</sup> 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.