

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:

April 1, 2000 Effective Date of Transfer

[] Oil Lease: No. of Wells _____ **

Lease Name WELLIVER 1-20

[X] Gas Lease: No. of Wells 1 **

** SIDE TWO MUST BE COMPLETED **

Sec 20 T 34 S R42 (W/E)

[] Saltwater Disposal Well - Docket No. _____

Legal Description of Lease: SW/4 Sec 20, W/2

Spot Location: _____ feet from N/S Line

SW/4 Sec 28, E/2 & N/2 NW/4 Sec 29, T34S-R42W

_____ feet from E/W Line

[] Enhanced Recovery Proj. Docket No. _____

County MORTON

Entire project: Yes/No

Number of injection wells _____ **

Production Zone(s) TOPEKA (2818-3030)

Field Name GREENWOOD GAS AREA

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. 9953

Contact Person: KATHLEEN COWAN

Past Operator's Name and Address:

HARRIS OIL AND GAS COMPANY

Phone: (303) 293-8838

1125 SEVENTEENTH STREET, SUITE 2290

Date 3/31/2000

DENVER, COLORADO 80202

Title VICE PRESIDENT

Signature _____

New Operator's License No. 5337

Contact Person STEPHEN J. HEYMAN

New Operator's Name and Address

Phone (918) 583-3333

NADEL AND GUSSMAN, L.L.C.

3200 FIRST PLACE TOWER

SUITE 3200

TULSA, OKLAHOMA 74103

Oil/Gas Purchaser CIG Merchant Company

Date 3/31/2000

Title MANAGER

Signature _____

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 _____

RECEIVED
STATE CORPORATION COMMISSION
Authorized Signature _____

Form T1 7/94

MAY 12 2000

CONSERVATION DIVISION
Wichita, Kansas

EP&R 5/25/00 PROB JUN 13 2000 5/01

*LEASE NAME WELLIVER 1-20

*LOCATION MORTON COUNTY

[illegible]

***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.**