

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 WILLIAMS 1-28

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

_____ Sec 28 T 33S R 43 W/E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: W/2 Sec 28

[] Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N/S Line N/2 Sec 32, T33S-R43W

_____ feet from E/W Line

[] Enhanced Recovery Proj. Docket No. _____

County MORTON

Entire project: Yes/No

Number of injection wells _____ **

Production Zone(s) TOPEKA (2814-3059')

Field Name GREENWOOD

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
1125 SEVENTEENTH STREET, SUITE 2290
DENVER, COLORADO 80202

Phone: (303) 293-8838

Date 3/31/2000

Title VICE PRESIDENT

Signature [Signature]

New Operator's License No. 5337

Contact Person STEPHEN J. HEYMAN

New Operator's Name and Address

NADEL AND GUSSMAN, L.L.C.
3200 FIRST PLACE TOWER
SUITE 3200
TULSA, OKLAHOMA 74103

Phone (918) 583-3333

Oil/Gas Purchaser CIG Merchant Company

Date 3/31/2000

Title MANAGER

Signature [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 _____

_____ is acknowledged as the new operator of the above named lease containing the surface pond permitted by # _____.

Date _____
Authorized Signature _____

Date _____
Authorized Signature _____

RECEIVED
STATE CORPORATION COMMISSION

Form TL 7/94

MAY 12 2000

CONSERVATION DIVISION
Wichita, Kansas

EP&R 5/25/00 PRO JUN 13 2000

MUST BE FILED FOR ALL WELLS

T1 7/94

*LEASE NAME		WILLIAMS 1-20		*LOCATION MORTON COUNTY		FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)		TYPE OF WELL (OIL/GAS INJ/WSW)		WELL STATUS (PROD/TA'D ABANDONED)	
WELL NO.	API NO. (YR DRLD/PRE '67)	Circle FSL/FNL	Circle FEL/FWL	3960	1320	Circle FSL/FNL	Circle FEL/FWL	GAS		PROD	
1-28	15-129-10374	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			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				
		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			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				
		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.