REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION AUTHORIZATION OR TRANSFER OF SURFACE POND PERMIT

KANSASCORPORATION COMMISSION CONSERVATION DIVISION 200 COLORADO DERBY BLDG. WICHITA, KANSAS 67202

Check Applicable Boxes:	Effective Date of Transfer Originally Transfered in 1991 neither Co. has one on file								
Oil Lease: No. of Wells**	Lease Name SALLEY D								
[x] Gas Lease: No. of Wells1_ ** ** SIDE TWO MUST BE COMPLETED**	CNESWSec29T_33S. R32_WE Legal Description of Leases_All of Section 29								
Spot Location: feet from N/S Line feet from E/W Line	CountySEWARD								
[] Enhanced Recovery Project Docket No Entire project: Yes/No Number of injection wells	Production Zone(s) MORROW								
THE LEWIS ADVALON WEST	Injection Zone(s)								
Field Name_ARKALON_WEST_	111Jection 2011e(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 S	torage PitDrill Pit								
List API#'s on all post-1967 wells transferred with lease	9:								
*****************	********								
1	Eact Person: Kumonli Hui								
	ne: <u>(9/8) 561-3548</u> Phaser								
OXY USA, Inc. P.O. Box 300 Tulsa, OK 74102									
Title ######### Sign	ature ************************************								
	onJohn S. Weir_/Diana Richecky ne316-681-0231								
Wichita, Ks. 67208 Oil/Gas Pure Date	haser 19/97								
Title _Administrative Assistant Sign	nature Aleans Lichertey								
ACKNOWLEDGEMENT OF TRANSFER: The above	ve request for transfer of injection authorization, surface pond permit #corded in the records of the Kansas Corporation Commission. This poration Commission records only and does not convey any ownership								
	is acknowledged as the								
is acknowledged	new operator of the above named lease containing								
as the new operator and may continue to inject fluids as authorized by Docket #	the surface pond permitted by #								
Recommended action	Tomo Darrago Portago and Transport of the Control o								
recommended action									
The state of the s									
Date	Date								
Authorized Signature	Authorized Signature								



															Ľ	ELL NO.	LEASE NAME
															9/63	API NO. (YR DRLD/PRE '67)	SALLEY D
FSL/FNL FEL/FWL	Circle Circle 1980 FSL/FNL 3300 FEL/FWL	(i.e. FSL=Feet from South Line)	*LOCATION: C NE SW														
															9 as	(OIL/GAS	TYPE OF WELL
															Prod	ABANDONED)	WELL STATUS

A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

each lease If a lease covers more than one section please indicate which section each well is located. *When transferring a unit which consists of more than one lease please file a separate side two for