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

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Check Applicable Boxes:

05/01/2000 Effective Date of Transfer

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

[X] Gas Lease: No. of Wells 1 **
** SIDE TWO MUST BE COMPLETED **

Lease Name Bowker

SW - SW - NE - NE Sec 4 T 32S R 40W W/E

Legal Description of Lease: NE Sec 4, 32S-40W

[ ] Saltwater Disposal Well - Docket No. _____
Spot Location: _____ feet from N/S Line
_____ feet from E/W Line

[ ] Enhanced Recovery Proj. Docket No _____
Entire project: Yes/No
Number of injection wells _____**

County Morton

Production Zone(s) Morrow

Injection Zone(s) _____

RECEIVED
STATE CORPORATION COMMISSION
JUN 12 2000
CONSERVATION DIVISION
Wichita, Kansas

Field Name Stirrup Ext.

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Surface Pond Permit # _____ _____ Feet from N/S Line of Section
(API No. If Drill Pit) _____ Feet from E/W Line of Section

Identify: Emergency Pit ☐ Burn Pit ☐ Storage Pit ☐ Drill Pit ☐

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Past Operator's License No. 32334

Past Operator's Name and Address:
Chesapeake Operating, Inc.
P. O. Box 18496
Oklahoma City, OK 73154-0496

Title Sr. Vice President-Operations

Contact Person: Steven C. Dixon

Phone: (405) 848-8000

Date May 26, 2000

Signature SCD

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New Operator's License No. 32462

New Operator's Name and Address
West Sunset Disposal
1304 N. Tulane
Liberal, KS 67901

Title President

Contact Person Bill Hill

Phone (316) 624-8624

Oil/Gas Purchaser _____

Date 6-1-00

Signature BE Hill

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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 _____ _____
Authorized Signature

Form T1 7/94

MAR 29 2001

EP&R 11/20/00 PROD _____ UIC 11-29-00

MUST BE FILED FOR ALL WELLS **SIDE 2**

T1 7/94

***LEASE NAME** Bowker ***LOCATION** Sec ~~4~~ 32, 32S-40W

WELL NO.	API NO. (YR DRLD/PRE '67)	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)				TYPE OF WELL (OIL/GAS INJ/WSW)	WELL STATUS (PROD/TA'D ABANDONED)
			Circle		Circle		
1-32	15-129-21121-0001	4030	FSL/FNL	1250	FEL/FWL	Gas	T.A.
			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.**