KANSAS CORPORATION COMMISSION

CONSERVATION DIVISION

Authorized Signature

Form T1 7/94

OR TRANSFER OF SURFACE POND PERMIT 130 S MARKET, ROOM 2078 WICHITA, KANSAS 67202 *********** Check Applicable Boxes: Effective Date of Transfer 05-01-96 [] Oil Lease: No. of Wells ** Lease Name KLINGER #1-12 [XX] Gas Lease: No. of Wells 1 C -SE - SE - SE sec 12 T 34S R 25 WYE ** SIDE TWO MUST BE COMPLETED ** Legal Description of Lease: [] Saltwater Disposal Well - Docket No. Spot Location: _____ feet from N/S Line 330'FSL & 330'FEL feet from E/W Line County Clark [] Enhanced Recovery Proj. Docket No____ Entire project: Yes/No Number of injection wells ** Production Zone(s) Chester Field Name McKinney Injection Zone(s) ************ __ Feet from N/S Line of Section Surface Pond Permit # (API No. If Drill Pit) Feet from E/W Line of Section Identify: Emergency Pit Burn Pit Storage Pit Drill Pit ********************* Contact Person: Kathy B. McGuire Past Operator's License No. 6378 Phone: (918) 585-3121 Past Operator's Name and Address: Hawkins Oil & Gas, Inc. 400 So. Boston, Suite 800 Tulsa, OK 74103 Title Vice President Operations ***************** New Operator's License No. 31300 Contact Person Dusty Smith Phone (918) 599-8128 New Operator's Name and Address Centrex Operating Company P.O. Box 52058 Oil/Gas Purchaser Western Resources, Inc. Tulsa, OK 74152-0058 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 is acknowledged as the as the new operator and may continue to new operator of the above named lease containing inject fluids as authorized by Docket # | the surface pond permitted by #______ Recommended action Date

REQUEST FOR CHANGE OF OPERATOR

TRANSFER OF INJECTION AUTHORIZATION

Authorized Signature

MUST BE FILED FOR ALL WELLS

477707				. 11 //54
*LEASE NAME	_Klinger #1-12	*LOCATION: Sec. 12-34S-25W		
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)
#1-12	15-025-20,385	330' FSL FNL 330' FEL FWL	Gas	Prod.
		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 scation when