

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:

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

[] 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 _____ **

Effective Date of Transfer May 1, 1999

Lease Name HUEY
____ - ____ - ____ Sec 20 T 30R 06W/E
21

Legal Description of Lease: NE/4 & SW/4

Section 21-30S-6W

County KINGMAN

Production Zone(s) MISSISSIPPI

Field Name Sec 20 Reida Sec 21 unnamed

Injection Zone(s) _____

Surface Pond Permit # _____

(API No. If Drill Pit)

Identify: Emergency Pit _____ Burn Pit _____ Storage Pit _____ Drill Pit _____

Past Operator's License No. 05002 ✓

Past Operator's name and address:

George R. Jones, Inc.

200 E. 1st #100

Wichita, KS 67202-2111

Contact Person: Cindy Jones

Phone: (316) 262-5503

Date: May 1, 1999

Title President

Signature: [Signature]

New Operator's License No. 31337 ✓

New Operator's Name and Address:

Wildcat Oil & Gas, LLC

10286 SW 170 Ave

Nashville, KS 67112

Contact Person: Gary Adelhardt

Phone: 316-246-5212

Oil/Gas Purchaser Kansas Gas Supply Corp

Date: 07-01-99

Title President

Signature: [Signature]

ACKNOWLEDGMENT OF TRANSFER: The above request for transfer of injection authorization, surface pond permit # _____ has been noted, approved and duly recorded in the record of the 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 # _____

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

Recommended action _____

by # _____

Date _____

STATE COMMISSION

Date _____

Authorized Signature

Authorized Signature Form T1 7/94

JUL - 6 1999

* LOCATION: SW Sec. 21 & NE/4 Sec. 20-30S-6W (Well in Sec. 20)

FOOTAGE FROM SECTION LINE
(i.e. FSL=Feet from South Line)

WELL STATUS
(PROD/TAD
ABANDONED)

Producing

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