	TOWN COMMISSION			
REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION AUTHORIZATION OR TRANSFER OF SURFACE POND PERMI	CONSERVATION DIVISION 130 S MARKET, ROOM 2078			
	WICHITA, KANSAS 67202			
*********	****			
Check Applicable Boxes:	Effective Date of Transfer			
[] Oil Lease: No. of Wells **	Lease Name Smith			
[X] Gas Lease: No. of Wells 1 ** ** SIDE TWO MUST BE COMPLETED **	Sec_24 T34S R_39 (W)			
	Legal Description of Lease:			
[] Saltwater Disposal Well - Docket No. Spot Location: feet from N	N/S Line $S/2$ Sec. 24 & $N/2$ Sec. 25-34S			
feet from F [] Enhanced Recovery Proj. Docket No				
Entire project: Yes/No Number of injection wells**	Production Zone(s) Council Grove			
Field Name Panoma	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 Pi	t Storage Pit Drill Pit			
********	*********			
Past Operator's Name and Address: Marsh Operating Company	Phone: (214) 969-0500 Date 5/29/96			
P.O. Box 460 Dallas, TX 75221 Title V.P. Production	Signature # Conh			
***********	Contact Person Marci Nickerson			
REAL PROPERTY OF THE PROPERTY	ECEIVED			
New Operator's Name and Address KANSAS COR	PORATION 713-752-5296			
Seagull Midcon Inc. 1001 Fannin, Suite 1700	N 2 92 17 (as) Purchaser Panhandle Eastern Pipe			
Houston, TX 77002	Date 6/3/96			
Title Regulatory Coordinator	RVATION DIVISTON WICHITA, KS Signature Marin Dickerson			
*****	***********			
ACKNOWLEDGEMENT OF TRANSFER: The above	re request for transfer of injection authorization een noted, approved and duly recorded in the reco			
of the Kansas Corporation Commission.	This acknowledgement of transfer pertains to Kar			
Corporation Commission records only and injection well(s) or pond permit.	does not convey any ownership interest in the ab			
	is acknowledged as			
as the new operator and may continue to				
inject fluids as authorized by Docket . Recommended action				
Date				
Authorized Signature	Authorized Signature			

MUST BE FILED FOR ALL WELLS

*LEASE NAME	Smith	*LOCATI	ON: <u>Sec. 24-34S-</u>			
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	15-189-20,563	1320'	Circle FSL/FNL 1320'	Circle FEL/FWL	Gas	Prod.
1			FSL/FNL	_ FEL/FWL		
			FSL/FNL	_ FEL/FWL		
	<u> </u>		FSL/FNL	_ FEL/FWL		
			FSL/FNL	_ FEL/FWL		
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
			FSL/FNL	_ FEL/FWL		1
			FSL/FNL	_ FEL/FWL		
			FSL/FNL	_ FEL/FWL		
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		1	FSL/FNL	_ FEL/FWL		
Advisory and proportion of the second of the			FSL/FNL	_ FEL/FWL		The state of the s

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.