

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

RECEIVED
STATE CORPORATION COMMISSION

Check Applicable Boxes:

- [] Oil Lease: No. of Wells _____ **
- [☒] Gas Lease: No. of Wells _____ **
** 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 _____ **

Field Name Aetna

Surface Pond Permit # _____
(API No. If Drill Pit)

Identify: Emergency Pit ☐ Burn Pit ☐

Effective Date of Transfer May 30, 1998

Lease Name Baier A 2

Sec 35 T 34 R 14 WE

Legal Description of Lease: _____

660 FNL + 330 FWL

County Barber

Production Zone(s) Mississippian

Injection Zone(s) _____

Feet from N/S Line of Section
Feet from E/W Line of Section

Storage Pit ☐ Drill Pit ☐

Past Operator's License No. 09012 5447 Contact Person: Dean Athens

Past Operator's Name and Address:

Oxy USA Inc.
P.O. Box 300
Tulsa, OK 74102-0300
Title Attorney-in-Fact

Phone: (918) 561-3577

Date May 28, 1998

Signature _____

New Operator's License No. 12420 4548 Contact Person Clark Southmayd

New Operator's Name and Address

Oneok Resources Company
100 W. 5th Street
Tulsa, OK 74103-4298

Phone (918) 588-7759

Oil/Gas Purchaser Citgo

Date May 28, 1998

Title Manager - Operations & Engineering

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
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

MUST BE FILED FOR ALL WELLS

*LEASE NAME

BALIE R A

*LOCATION: 35-34s-14w

WELL NO.

API NO.
(YR DRID/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)

2

15-007-22469

660 ^{circle} FSL/FNL 330 ^{circle} 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 _____

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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.