

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 COMMISSION

Check Applicable Boxes:

☒ Oil Lease: No. of Wells 3 **
[] 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 SPIVEY - GRABS

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

Identify: Emergency Pit ☐ Burn Pit ☐

Effective Date of Transfer May 30, 1998

Lease Name MESSENGER D

_____-_____-_____- Sec 18 T 30 R 8 WE

Legal Description of Lease: _____

County KINGMAN

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 _____

MIGHT BE FITTED FOR ALL WELLS

LOCATION: 18-305-8W

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

TYPE OF WELL
(OIL/GAS
INJ/MSW)

WELL STATUS
(PROD/TA'D
ABANDONED)

TREAS. NAME

MEISER ID

WELL NO.

API NO.
(YR DRLD/PRE '67) *

[illegible]

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.