

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:

STATE CORPORATION

[ ] Oil Lease: No. of Wells 0000

[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 \_\_\_\_\_

Field Name WILMORE

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

Identify: Emergency Pit ☐ Burn Pit ☐

Effective Date of Transfer May 30, 1998

Lease Name Yost #2

Sec 15 T 3 R 17 W E

Legal Description of Lease: \_\_\_\_\_

4620 FSL 4813 FEL

County Comanche

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. 090125447 Contact Person: Dean Athens

Past Operator's Name and Address: \_\_\_\_\_ Phone: (918) 561-3577

Oxy USA Inc.  
P.O. Box 300  
Tulsa, OK 74102-0300  
Title Attorney-in-Fact  
Date May 28, 1998  
Signature \_\_\_\_\_

New Operator's License No. 124204548 Contact Person: Clark Southmayd

New Operator's Name and Address: \_\_\_\_\_ Phone: (918) 588-7759

Oneok Resources Company  
100 W. 5th Street  
Tulsa, OK 74103-4298  
Oil/Gas Purchaser Trident-KGS  
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 # \_\_\_\_\_.

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

Post

WELL NO.

API NO.  
(YR DRID/PRE '67)

\*LOCATION: 15-315-17W  
FOOTAGE FROM SECTION LINE  
(i.e. FSL=Feet from South Line)

TYPE OF WELL  
(OIL/GAS  
INJ/MSW)

WELL STATUS  
(PROD/TA'D  
ABANDONED)

2

15-033-20693

4620

Circle FSL/FNL 4813 Circle FEL/FWL

Gas

Prod

FSL/FNL

FEL/FWL

FSL/FNL

FEL/FWL

FSL/FNL

FEL/FWL

FSL/FNL

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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.