

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:

Effective Date of Transfer 05/31/98

[] Oil Lease: No. of Wells _____ **

[X] Gas Lease: No. of Wells 1 **

** SIDE TWO MUST BE COMPLETED **

Lease Name Archer Gas Unit

SE/4 S19 T21S R32W

N/2 - - - Sec 6 T22S R32W W/E

SW/4 & W/2-SE/4 (S20) T21S R32W

Legal Description of Lease: SE/4 Sec 19 T21S R32W
And N/2 Sec 6 T22S R32W And SW/4 Sec 20
T21S R32W And W/2 of SE/4 Sec 20 T21S R32W

[] 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 _____ **

County Finney

Production Zone(s) Krider

Field Name Hugoton

Injection Zone(s) _____

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

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

Identify: Emergency Pit ☐ Burn Pit ☐

Storage Pit ☐ Drill Pit ☐ *HT*

Past Operator's License No. 3857

Contact Person: Rick L. Hurt

Past Operator's Name and Address:
Unico, Inc.

Phone: (505) 326-2668

1921 Bloomfield Blvd.

Date 05/31/98

Farmington, NM 87401

Title Treasurer (at time of transfer) Signature *Rick L. Hurt*

New Operator's License No. 32356

Contact Person Rick L. Hurt

New Operator's Name and Address

Phone (505) 326-2668

Intermountain Refining Co., Inc.
P.O. Box 35

Oil/Gas Purchaser KN Energy Inc.

Farmington, NM 87499

Date 05/31/98

Title Treasurer _____

Signature *Rick L. Hurt*

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 _____

_____ is acknowledged as the new operator of the above named lease containing the surface pond permitted by # _____.
RECEIVED

ST. CORPORATION COMMISSION

Date _____
Authorized Signature _____

Date DEC 21 1997
Authorized Signature _____

Conservation Division
Wichita, Kansas

Form T1 7/94

*LEASE NAME Archer Gas Unit

*LOCATION: C SW/4 Sec 20 T21S R32W

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/MSW)

WELL STATUS
(PROD/TA'D
ABANDONED)

15055001590000 ✓

1.320

Circle
FSL/XXX 1, 320

Circle
XTR / FWT

528

Prod

[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.