REQUEST FOR CHANGE OF OPERATOR KANSAS CORPORATION COMMISSION TRANSFER OF INJECTION AUTHORIZATION CONSERVATION DIVISION OR TRANSFER OF SURFACE POND PERMIT

200 COLORADO DERBY BLDG. WICHITA, KANSAS 67202

Effective Date of Transfer6/30/95	Check Applicable Boxes:
Lease Name _FLOWER UNIT WELL #2	[] Oil Lease: No. of Wells
SW-NE Sec5_ T33S. R36W)E	[X] Gas Lease: No. of Wells1
Legal Description of Lease: NE/4; S/2 SEC. 5 & SE/4 SEC. 6-33S-36W_	[] Saltwater Disposal Well - Docket No. Spot Location: feet from N/S Line feet from E/W Line
County _STEVENS	[] Enhanced Recovery Project Docket No.
Production Zone(s)_MORROW	Entire project: Yes/No Number of injection wells
Injection Zone(s)	Field NameWALKEMEYER_NW
Surface Pond Permit #N/A	Feet from N/S Line of Section Feet from E/W Line of Section
Identify: Emergency Pit Burn Pit	
List API#'s on all post-1967 wells transf	erred with lease:
*********	*************
Past Operator's License No5208	Contact Person: _Rae Kelly
Past Operator's Name and Address: Mobil Oil Corporation	Phone:(316) 626-1160
P.O. Box 2173	Date6/30/95
Liberal, KS 67905	
Title _Regulatory Tech	Signature
	V
New Operator's License No3871	CONTRACT PEISON _EARL KINGEISENVATE CORPORATE CORPORATE
New Operator's Name and Address	Signature *********** *********** Contact Person _EARL RINGEISEN FATE CORPORATION COMMISSIO Oil/Gas Purchaser
HUGOTON ENERGY CORPORATION 301 N. MAIN, SUITE 1900	Oil/Gas Purchaser
WICHITA, KS 67202	eo _{ly} , 995
	Date 6/30/95 CON Signature 6/30/95
Title _VICE-PRESIDENT PRODUCTION	Signature ************************************
	request for transfer of injection authorization,
surface pond permit # has been of the Kansas Corporation Commission. The	noted, approved and duly recorded in the records is acknowledgement of transfer pertains to Kansas es not convey any ownership interest in the above
as the new operator and may continue to inject fluids as authorized by Docket # Recommended action	new operator of the above named lease containing the surface pond permitted by #
Date	Date
Authorized Signature	Authorized Signature Form T1 10/91

