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

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Effective Date of Transfer6/30/95	Check Applicable Boxes:
Lease Name _JONES NO. 1 UNIT WELL #3	[ ] Oil Lease: No. of Wells
sw-sw sec3 T33s. R36	[X] Gas Lease: No. of Wells1
Legal Description of Lease:	[ ] Saltwater Disposal Well - Docket No.  Spot Location: feet from N/S Line feet from E/W Line
County _STEVENS	[ ] Enhanced Recovery Project Docket No Entire project: Yes/No
Production Zone(s)_MORROW	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	Storage Pit
List API#'s on all post-1967 wells transferred with lease:	
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Past Operator's License No5208	Contact Person: _Rae Kelly
Past Operator's Name and Address: Mobil Oil Corporation P.O. Box 2173	Phone:(316) 626-1160  Date6/30/95
Liberal, KS 67905 Title _Regulatory Tech	Signature Las Kelly
*****	· · · · · · · · · · · · · · · · · · ·
New Operator's License No3871	Contact Person _EARL RINGEISENRECEIVED
New Operator's Name and Address HUGOTON ENERGY CORPORATION	Phone(316) 262-\$\frac{1522}{2522} \frac{\text{RECEIVED}}{\text{CORPORATION COMMISSION}}
301 N. MAIN, SUITE 1900 WICHITA, KS 67202	Oil/Gas Purchaser JUL 3 1 1995
	Date6/30/95
Title _VICE-PRESIDENT PRODUCTION	Date
ACKNOWLEDGEMENT OF TRANSFER: The above surface pond permit # has been of the Kansas Corporation Commission. The	request for transfer of injection authorization, noted, approved and duly recorded in the records is acknowledgement of transfer pertains to Kansas es not convey any ownership interest in the above
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 #
Date	Date
Authorized Signature	Authorized Signature Form T1 10/91

