

REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION AUTHORIZATION
OR TRANSFER OF SURFACE POND PERMIT

KANSAS CORPORATION COMMISSION
CONSERVATION DIVISION
130 SOUTH MARKET, ROOM 2078
WICHITA, KANSAS 67202

Check Applicable Boxes

Effective Date Of Transfer 6/30/98

[] Oil Lease: No. of Wells _____

Lease Name ___C.L. Bertholf_____

[X] Gas Lease: No. of Wells ___1_____

___-C- N2- SW Sec 33T 29R 8 W

[] Saltwater Disposal Well

Legal Description of Lease_____

Docket Number _____

Sec 33-T29-R8W

Spot Location: _____ feet from N/S Line

County Kingman

_____ feet from E/W Line

Production Zones Miss Chat

[] Enhanced Recovery Proj.

Docket Number _____

Injection Zones _____

Entire Project: YES/NO

Number of Injection Wells _____

Field Name NA

Surface Pond Permit # _____

_____ Feet from N/S Line of Section

(API# if Drill Pit)

_____ Feet from E/W Line of Section

Identify: Emergency Pit

Burn Pit

Storage Pit

Drill Pit

Past Operator's License No. 5615 ✓

Contact Person: Scott M. Webb

Past Operator's Name and Address:

Phone: (303) 573-5100

UMC Petroleum Corporation

Date 9/25/98

410 17th Street, Suite 1400

Signature 

Denver, Colorado 80202

Title Regulatory Coordinator

New Operator's License No. 5615 ✓

Contact Person Scott M. Webb

New Operator's Name and Address

Phone (303) 573-5100

Ocean Energy Resources, Inc

Oil/Gas Purchaser _____

410 17th Street, Suite 1400

Date 9/25/98

Denver, Colorado 80202

Title Regulatory Coordinator

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 _____

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

Date _____

Date _____

Authorized Signature

Authorized Signature

MUST BE FILED FOR ALL WELLS

*Lease Name _____ CL Bertholf _____ *Location _____ 33-T29-R8W _____

Well #	API#/ Year Drilled, Pre 67	Footage From Section Line		Type Of Well	Status
1	7/16/58 15-095-00839	1320' FWL	1170' FSL (2310)	Gas	Prod.