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

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

Form T1 7/94

**************************************	** WICHITA, KANSAS 6/202  ** Effective Date Of Transfer 6/30/98					
Check Applicable Boxes						
[X] Oil Lease: No. of Wells 2	Lease Name Hostettler					
[ ] Gas Lease: No. of Wells	Sec 19-T30S-R8W					
[ ] Saltwater Disposal Well Docket Number Spot Location: feet from N/S Line	Legal Description of Lease SESE SECTION 19 & NWNE SECTION 30  County Kingman					
feet from E/W Line [ ] Enhanced Recovery Proj.	Production Zones Mississippi Chat					
Docket Number Entire Project: YES/NO Number of Injection Wells	Injection Zones					
Field Name Spivey Grabs ************************************						
Identify: Emergency Pit Burn Pit	Storage Pit Drill Pit					
**************************************						
Past Operator's Name and Address: UMC Petroleum Corporation	Phone:(303) 573-5100					
410 17th Street, Suite 1400	Date 9/25/98					
**************************************	**************************************					
New Operator's Name and Address	Phone (303) 573-5100					
Ocean Energy Resources, Inc 410 17th Street, Suite 1400	Oil/Gas Purchaser Texaco Trading and Trans.					
Denver, Colorado 80202	Date 9/25/98					
Title Regulatory Coordinator	Signature At Land.					
************************************  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					
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

Hostett1er

\*Location

Kingman County

Well #	API#/ Year Drilled, Pre 67	Footage From Section	Line	Type Of Well	Status
1	2/4/56	990' FEL	990' FSL	OIL	TA
2	12/7/57	2310' FEL	2310' FSL	OIL	TA