

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

STATE CORPORATION COMMISSION

JUL 05 2000

CONSERVATION DIVISION
Wichita, Kansas

Check Applicable Boxes:

Effective Date of Transfer July 1, 2000

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

Lease Name Barby #1

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

- - W/2 NW/4 Sec 29 T34S R27W W/E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: ALL

[] Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N/S Line

Section 29, T34S-R27W

_____ feet from E/W Line

[] Enhanced Recovery Proj. Docket No. _____

County Meade

Entire project: Yes/No

Number of injection wells _____ **

Production Zone(s) Council Grove

Field Name McKinney-Finchman

Injection Zone(s) N/A

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 ☐

Past Operator's License No. 31219

Contact Person: Steven K. Blair

Past Operator's Name and Address:

Phone: (405) 947-1091

Prime Operating Company
5400 N. Grand Boulevard, Suite 450
Oklahoma City, OK 73112

Date 7/3/00

Title District Manager

Signature Steven K. Blair

New Operator's License No. 03795

Contact Person Theresa Braswell

New Operator's Name and Address

Phone (580) 921-3366

The South Forty, Inc.
P.O. Box 446
Laverne, OK 73848

Oil/Gas Purchaser GPM/Duke

Date July 1, 2000

Title Office Secretary

Signature Theresa Braswell

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 _____

Date _____
Authorized Signature

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

Date _____
Authorized Signature

Form T1 7/94

EP&R 9/5/2000 PRO MAR 29 2000 9:29:00

MUST BE FILED FOR ALL WELLS

**SIDE 2
T1 7/94**

***LEASE NAME** BARBY #1

***LOCATION** W/2 NW/4, SECTION 29, T34S-R27W, Meade Co., KS

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/WSW)	WELL STATUS (PROD/TA'D ABANDONED)
<u>1</u>	<u>15-119-20788</u> ✓	<u>1320</u>	<u>Circle FSL/FNL</u> <u>660</u> <u>Circle FEL/FWL</u>	<u>GAS</u>	<u>Shut-in/prod.</u>
_____	_____	_____	<u>FSL/FNL</u> _____ <u>FEL/FWL</u>	_____	_____
_____	_____	_____	<u>FSL/FNL</u> _____ <u>FEL/FWL</u>	_____	_____
_____	_____	_____	<u>FSL/FNL</u> _____ <u>FEL/FWL</u>	_____	_____
_____	_____	_____	<u>FSL/FNL</u> _____ <u>FEL/FWL</u>	_____	_____
_____	_____	_____	<u>FSL/FNL</u> _____ <u>FEL/FWL</u>	_____	_____
_____	_____	_____	<u>FSL/FNL</u> _____ <u>FEL/FWL</u>	_____	_____
_____	_____	_____	<u>FSL/FNL</u> _____ <u>FEL/FWL</u>	_____	_____
_____	_____	_____	<u>FSL/FNL</u> _____ <u>FEL/FWL</u>	_____	_____
_____	_____	_____	<u>FSL/FNL</u> _____ <u>FEL/FWL</u>	_____	_____
_____	_____	_____	<u>FSL/FNL</u> _____ <u>FEL/FWL</u>	_____	_____
_____	_____	_____	<u>FSL/FNL</u> _____ <u>FEL/FWL</u>	_____	_____
_____	_____	_____	<u>FSL/FNL</u> _____ <u>FEL/FWL</u>	_____	_____
_____	_____	_____	<u>FSL/FNL</u> _____ <u>FEL/FWL</u>	_____	_____
_____	_____	_____	<u>FSL/FNL</u> _____ <u>FEL/FWL</u>	_____	_____
_____	_____	_____	<u>FSL/FNL</u> _____ <u>FEL/FWL</u>	_____	_____

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.**