

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

Check Applicable Boxes:

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

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

** SIDE TWO MUST BE COMPLETED **

[] Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N/S Line

_____ feet from E/W Line

[] Enhanced Recovery Proj. Docket No. _____

Entire project: Yes/No

Number of injection wells _____ **

Field Name _____

Surface Pond Permit # _____

(API No. If Drill Pit)

Identify: Emergency Pit ☐

Burn Pit ☐

Storage Pit ☐

Drill Pit ☐

Effective Date of Transfer 8/1/95

Lease Name Mueller, Alberta 2

SE-NW-NW Sec 30 T34S R 34W W/

Legal Description of Lease: _____

ALL 30 34s 34w

County Seward

Production Zone(s) CHASE

Injection Zone(s) _____

_____ Feet from N/S Line of Section

_____ Feet from E/W Line of Section

Past Operator's License No. 25090

Contact Person: John V. Peters

Past Operator's Name and Address:

Santa Fe Minerals, Inc.

5420 LBJ Freeway, Suite 1100

Dallas, Texas 75240-2648

Title Vice President

Phone: (214) 701-7300

Date August 1, 1995

Signature John V. Peters

New Operator's License No. 31658

Contact Person Vaughn O. Vennerberg, II

New Operator's Name and Address

Cross Timbers Operating Company

210 West Park Avenue, Suite 2350

Oklahoma City, Oklahoma 73102

Phone (405) 232-4011

Oil/Gas Purchaser _____

Date August 1, 1995

Signature Vaughn O. Vennerberg

Title Senior Vice President - 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 new operator and may continue to inject fluids as authorized by Docket # _____. Recommended action _____

Date _____

Authorized Signature _____

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

RECEIVED
STATE CORPORATION COMMISSION

AUG 04 1995

Date _____

Authorized Signature _____

CONSERVATION
WICHITA, KANSAS

Form T1

*LEASE NAME

MUELLER, ALBERTA

*LOCATION:

NW/4

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)24025

Circle

FSL/FNL

3960

Circle

FEL/FWL

GASPROD

FSL/FNL

FEL/FWL

FSL/FNL

FEL/FWL

FSL/FNL

FEL/FWL

FSL/FNL

FEL/FWL

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FEL/FWL

FSL/FNL

FEL/FWL

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.