REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION AUTHORIZATION OR TRANSFER OF SURFACE POND PERMIT	KANSAS CORPORATION COMMISSION CONSERVATION DIVISION J.H. 130 S MARKET, ROOM 2078 WICHITA, KANSAS 67202			
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Check Applicable Boxes:	Effective Date of Transfer8/1/95			
[] Oil Lease: No. of Wells **	Lease Name Dubois Goldie 2			
Gas Lease: No. of Wells ** ** SIDE TWO MUST BE COMPLETED **	C_NM Sec_6 T34S R34W W/ Legal Description of Lease:			
[] Saltwater Disposal Well - Docket No. Spot Location: feet from N/S	Line ALL 6 345 34W			
[] Enhanced Recovery Proj. Docket No	W Line			
그리아 환경하다 하다 하다 그녀는 뭐니 아니까 바다를 하다고 살아가셨다면서 하다 사람이 바람에 되었었다. 바라를 하다 모두드는 하다 하다 하다 하다 하다 그리고 하다 그리고 하다 하다 하다 하다.	Production Zone(s) CHASE			
Field Name	Injection Zone(s)			

Surface Pond Permit # (API No. If Drill P.	Feet from N/S Line of Section it) Feet from E/W Line of Section			
경기가 가장하다는 경기가 가는 경찰을 하는 것이 가득했다면서 가장하는 것이 하는 것이 가장 하는 것이 되었다.				
Identify: Emergency Pit Burn Pit	Storage Pit Drill Pit S			
**********	**************************************			
Past Operator's License No. 25090	Contact Person:			
Past Operator's Name and Address: Santa Fe Minerals, Inc.	Phone: (214) 701-7300			
5420 LBJ Freeway, Suite 1100	Date August 1, 1995			
Dallas, Texas 75240-2648	adent			
Title Vice President	Signature Mulliture			
New Operator's License No. 31658	Contact Person Vaughn O. Vennerberg, II			
New Operator's Name and Address	Phone (405) 232-4011			
Cross Timbers Operating Company 210 West Park Avenue, Suite 2350	Oil/Gas Purchaser			
Oklahoma City, Oklahoma 73102	1 1605			
	Date August 1, 1995			
Title Senior Vice President - Land	Signature 1. Manufut			

ACKNOWLEDGEMENT OF TRANSFER: The above	request for transfer of injection authorizati en noted, approved and duly recorded in the reco			
of the Kansas Corporation Commission. The	his acknowledgement of transfer pertains to Kar			
Corporation Commission records only and dinjection well(s) or pond permit.	does not convey any ownership interest in the ab			
is acknowledged	is acknowledged as			
as the new operator and may continue to				
inject fluids as authorized by Docket # . Recommended action				
	AUG 0 4 1995			
Date	Date			
Authorized Signature	Company Authorized Signature Form T1			

	,	WOOT DE	WAST DE LINES EAN UNE MEDICO					
*LEASE NAME	GOLDIE DUBOIS	*LOCATIO	on: <u>NW/4</u>	<u> </u>				
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)		
2		1320	circle FSL/FNL /320	Circle FEL FWL	<u>Gas</u>	PRIS		
			FSL/FNL	FEL/FWL				
			FSL/FNL	FEL/FWL				
			FSL/FNL	FEL/FWL				
	n .		FSL/FNL	FEL/FWL	•			
			fsl/fnl	FEL/FWL				
			FSL/FNL	FEL/FWL				
***************************************			FSL/FNL	FEL/FWL				
			FSL/FNL	FEL/FWL				
			FSL/FNL	FEL/FWL				
			FSL/FNL	FEL/FWL				
		•	FSL/FNL	FEL/FWL	,			
			FSL/FNL	FEL/FWL	·	<u> </u>		
			FSL/FNL	FEL/FWL				

A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

FSL/FNL FEL/FWL

FSL/FNL FEL/FWL

*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.