

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 ☐ JK

Effective Date of Transfer 8/1/95

Lease Name Engle, Blanche 1

C-52-52-NW Sec 32 T 34S R 34W W/

Legal Description of Lease: _____

ALL 32 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 [Signature]

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 [Signature]

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

Date AUG 04 1995
Authorized Signature _____

WICHITA, KANSAS Form T1

*LEASE NAME

ENGEL

*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)
1		2440 Circle FSL/FNL 1320 Circle FEL/FWL	GAS	PROD
		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	
		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	
		FSL/FNL	FEL/FWL	
		FSL/FNL	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.