REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION AUTHORIZATION OR TRANSFER OF SURFACE POND PERMIT	KANSAS CORPORATION COMMISSION ON CONSERVATION DIVISION 130 S MARKET, ROOM 2078 WICHITA, KANSAS 67202
***********	Effective Date of Transfer 8/1/95
Check Applicable Boxes:	
Oil Lease: No. of Wells **	Lease Name Nix, Clarence 2
Gas Lease: No. of Wells / ** ** SIDE TWO MUST BE COMPLETED **	Legal Description of Lease:
[] Saltwater Disposal Well - Docket No. Spot Location: feet from N,	- 111 H 31/2 31/4/
feet from E, [] Enhanced Recovery Proj. Docket No	/W Line
하게 다니어를 가득적성했다. 하는 물로 없다면 되었는데 하는데 일반에 되었다. 그는데 그는 그 그는데 그는데 그는데 그는데 그는데 그는데 그는데 그는	Production Zone(s) CHASE
Pield Name	Injection Zone(s)
Field Name	女士女女女女女女女女女女女女女女女女女女女女女女女女女女女女女女女女女女
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 S
**********	*************
Past Operator's License No. 25090	Contact Person:
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 August 1
**********	**********
New Operator's License No. 31658	Contact Person Vaughn O. Vennerberg, II
New Operator's Name and Address Cross Timbers Operating Company	Phone (405) 232-4011
210 West Park Avenue, Suite 2350 Oklahoma City, Oklahoma 73102	Oil/Gas Purchaser
OKTATIONIA CTCS, OKTATIONIA 75252	Date August 1, 1995
Title Senior Vice President - Land	Signature 60, Minnutur
Title Senior vice President - Land	**********
ACKNOWLEDGEMENT OF TRANSFER: The above	e request for transfer of injection authorizat:
surface mond permit # has b	een noted, approved and duly recorded in the reco
Corporation Commission records only and	This acknowledgement of transfer pertains to Kar does not convey any ownership interest in the al
injection well(s) or pond permit.	
is acknowledge	d is acknowledged as
as the new operator and may continue t inject fluids as authorized by Docket . Recommended action	
	AUG 0 4 1995
Date	Date
Authorized Signature	CONSTRA Authorized Signature Form T1

*LEASE NAME	NIX	*LOCATION: NW/if:		
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		Circle Circle FSL/FNL /250 FEL/FW	D GAS	PROD
		FSL/FNL FEL/FW	L	
		FSL/FNL FEL/FW	L	
		FSL/FNL FEL/FW	<u> </u>	
		FSL/FNL FEL/FW	L	
		FSL/FNLFEL/FW	L	
		FSL/FNL FEL/FW	L	
•		FSL/FNL FEL/FW	L	
1		FSL/FNL FEL/FW	L	
	•	FSL/FNL FEL/FW	L	
		FSL/FNL FEL/FW	L	
		FSL/FNL FEL/FW	L ,,	
	7	FSL/FNL FEL/FW	L	
		FSL/FNL FEL/FW	L	
		FSL/FNL FEL/FW	L ,	
		FSL/FNL FEL/FW	L :	

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.