Authorized Signature	Authorized Signature Form T1
Date	Date Constant Authorized Signature
	- IOM
. Recommended action	AUG 0 4 1995
inject fluids as authorized by Docket #	the surface pond spermutted by CMIMISSION
as the new operator and may continue to	is acknowledged as new operator of the above named lease contain
	1
injection well(s) or pond permit.	
Corporation Commission records only and do	des not convey any ownership interest in the all
surface pond permit # has bee	n noted, approved and duly recorded in the recois acknowledgement of transfer pertains to Ka
ACKNOWLEDGEMENT OF TRANSFER: The above	request for transfer of injection authorization
**********	*******
Title Senior Vice President - Land	Signature D. Manning
	Date August 1,/1995
Oklahoma City, Oklahoma 73102	Page August 1 /1005 /
210 West Park Avenue, Suite 2350	Oil/Gas Purchaser
New Operator's Name and Address Cross Timbers Operating Company	Phone (403) 232 4011
	Phone (405) 232-4011
New Operator's License No. 31658	Contact Person Vaughn O. Vennerberg, II
************	*********
Dallas, Texas 75240-2648 Title Vice President	Signature AllMite
5420 LBJ Freeway, Suite 1100	Date August 1, 1995
Santa Fe Minerals, Inc.	
Past Operator's Name and Address:	Phone: (214) 701-7300
Past Operator's License No. 25090	
**************	**************************************
Identity. Smergeney 110	
Identify: Emergency Pit Burn Pit	Storage Pit Drill Pit S
(API No. If Drill Pi	그는 그는 그는 그는 그는 그들은 그는 그들은 그들은 그는 그는 그들은
Surface Pond Permit #	Feet from N/S Line of Section t) Feet from E/W Line of Section
**************************************	****
Field Name	Injection Zone(s)
Number of injection wells**	Production Zone(s) OHTIOC
- · · · · · · · · · · · · · · · · · · ·	
[] Enhanced Recovery Proj. Docket No	
Spot Location: feet from N/S feet from E/W	Tina
[] Saltwater Disposal Well - Docket No.	Line ALL 19 345 34W
	Legal Description of Lease:
Gas Lease: No. of Wells ** ** SIDE TWO MUST BE COMPLETED **	
: 15 10 10 10 10 10 10 10 10 10 10 10 10 10	SW_SW_NE_ sec_ 19 T 34S R 34W W/
[] Oil Lease: No. of Wells **	Lease Name Rogers J P 2
Check Applicable Boxes:	
	Effective Date of Transfer 8/1/95
*********	***
OR TRANSFER OF SURFACE POND PERMIT	WICHITA, KANSAS 67202
TRANSFER OF INJECTION AUTHORIZATION	
REQUEST FOR CHANGE OF OPERATOR	KANSAS CORPORATION COMMISSION

*LEASE NAME	Rogers	*LOCATI	on: <u>NE/4</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		200'	Circle (FSL)/FNL 200	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 💯			
			FSL/FNL			<u> </u>
			FSL/FNL			,

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.