

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:

[X] Oil Lease: No. of Wells 1 (#3) **

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

** 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 _____ **

Effective Date of Transfer 08/01/96

Lease Name DUNBAR

- NE - NE - NE Sec 1 T29S R 16 W/X

Legal Description of Lease: NE/4

County KIOWA

Production Zone(s) Mississippi

Field Name N. E. Pyle

Injection Zone(s) N/A

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 ☐

Past Operator's License No. 30972

Contact Person: R. A. CHRISTENSEN

Past Operator's Name and Address:

PETROGLYPH OPERATING CO., INC.

P. O. Box 1839

Hutchinson, KS 67504

Title Vice President

Phone: (316) 665-8500

Date August 12, 1996

Signature [Signature]

New Operator's License No. 8061

Contact Person John S. Weir

New Operator's Name and Address

OIL PRODUCERS INC. OF KANSAS

2400 N. Woodlawn, Suite 115

P. O. Box 8647

Wichita, KS 67208

Phone (316) 681-0231

Oil/Gas Purchaser NCRA

Date August 12, 1996

Title President

Signature [Signature]

ACKNOWLEDGEMENT OF TRANSFER: The above request for transfer of injection authorization, surface pond permit # _____ has been noted, approved and duly recorded in the record 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 the
new operator of the above named lease containing
the surface pond permitted by # _____

Date _____
Authorized Signature _____

*LEASE NAME DunBAR

*LOCATION: NENE NE

WELL NO.	API NO.	(YR DRLD/PRE '67)
1	2	3
4	5	6
7	8	9
10	11	12
13	14	15
16	17	18
19	20	21
22	23	24
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FOOTAGE FROM SECTION LINE
(i.e. FSL=Feet from South Line)

**WELL STATUS
(PROD/TA'D
ABANDONED)**

[illegible]

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.