

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 HUGOTON GAS AREA

Surface Pond Permit # _____
(API No. If Drill Pit)

Identify: Emergency Pit ☐ Burn Pit ☐

Effective Date of Transfer 8/1/99

Lease Name MOS GAS UNIT

_____ Sec 24 T 21S R 34 W/E

Legal Description of Lease: _____

_____ NW, NE & SW SEC. 24 & SW SEC. 13

County FINNEY

Production Zone(s) _____

Injection Zone(s) _____

_____ Feet from N/S Line of Section
_____ Feet from E/W Line of Section

Storage Pit ☐ Drill Pit ☐

Past Operator's License No. 31577

Past Operator's Name and Address:

MCNIC Oil & Gas Midcontinent, Inc.
3000 Oklahoma Tower, 210 Park Avenue
Oklahoma City, OK 73102
Title Petroleum Engineer

Contact Person: Ed Pearson

Phone: (405) 516-1100

Date 7/19/99

Signature Ed Pearson

New Operator's License No. X 32493

New Operator's Name and Address

Midcontinent Acquisition Properties, Inc.
3000 Oklahoma Tower, 210 Park Avenue
Oklahoma City, OK 73102

Contact Person Ed Pearson

Phone (405) 516-1100

Oil/Gas Purchaser X OIL NONE/KN GAS SUPPLY

Date 7/19/99

Title Petroleum Engineer

Signature Ed Pearson

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 _____

_____ is acknowledged as the
new operator of the above named lease containing
the surface pond permitted by # _____

Date _____
Authorized Signature _____

Date _____
Authorized Signature _____

Form T1 7/9-

MIGHT BE FITTED FOR ALL WELLS

*LOCATION: SEC. 24-21S-34W

API NO.
(YR DRLD/PRE '67)

FOOTAGE FROM SECTION LINE
(i.e. FSL=feet from South Line)

1250 **circle** **WEST/ENT.** 1320 **circle** **FRT./EWT.**

PROD[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