

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:

Effective Date of Transfer 9/1/97

☐ Oil Lease: No. of Wells _____ **

Lease Name MOORHEAD

☒ Gas Lease: No. of Wells 1 **

_____-_____-_____-Sec 13 T 31 R 35 W/E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: 1935' FSL & 3164'

☐ Saltwater Disposal Well - Docket No. _____
Spot Location: _____ feet from N/S Line
_____ feet from E/W Line

FEL

☐ Enhanced Recovery Proj. Docket No. _____
Entire project: ☐ Yes ☐ No
Number of injection wells _____ **

County STEVENS

Production Zone(s) CHASE

Field Name HUGOTON

Injection Zone(s) _____

Surface Pond Permit # _____ Feet from N/S Line of Section
(API No. If Drill Pit) _____ Feet from E/W Line of Section

Identify: Emergency Pit ☐ Burn Pit ☐ Storage Pit ☐ Drill Pit ☐

Past Operator's License No. 04824 Contact Person: ED HANCE KANSAS CORPORATION COMMISSION

Past Operator's Name and Address
MESA OPERATING CO.
14000 QUAIL SPRINGS PKWY, #5000
OKLAHOMA CITY, OK 73134
Title DIVISION VICE PRESIDENT

Phone 405-749-1780

OCT 10 1997

Date 10/1/97

Signature Edwin Hance CONSERVATION DIVISION
WICHITA, KS

New Operator's License No. 32193 Contact Person: RICHARD MARLIN

New Operator's Name and Address
PIONEER NATURAL RESOURCES USA, INC
14000 QUAIL SPRINGS PKWY, #5000
OKLAHOMA CITY, OK 73134

Phone 405-749-1780

Oil/Gas Purchaser NNG

Date 10/1/97

Title DIVISION OPERATIONS MANAGER Signature Richard Marlin

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 _____

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

Date _____
Authorized Signature _____

Date _____
Authorized Signature _____

MUST BE FILED FOR ALL WELLS

* LEASE NAME MOORHEAD _____

* LOCATION: 13-31S-35W _____

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)
2-13	1518921518	1925 <u>Circle</u> FSL/FNL 3164 <u>Circle</u> FEL/FWL	GAS	PROD
		FSL/FNL		
		FSL/FNL		
		FSL/FNL		
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		FSL/FNL		

A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

*When transferring a unit which consists of more than one section please indicate which section each well is located. If a lease covers more than one section please indicate which section each well is located.