

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 9/1/99

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

Lease Name Davis Ranch B

[XX] Gas Lease: No. of Wells 1 **

- SW - NW - SW Sec 28 T 33S R 14W W/E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: _____

[] 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 _____ **

County Barber

Production Zone(s) Mississippi

Field Name West Medicine Lodge

Injection Zone(s) _____

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. 3048

Contact Person: Jim Knipe

Past Operator's Name and Address:

Bristol Resources Corporation

6655 S. Lewis, Suite 200

Tulsa, Oklahoma 74136

Phone: (918) 492-7900

Date 7/20/99

Title Terry Hester

Signature Terry Hester

New Operator's License No. 32531

Contact Person Ron Jackson

New Operator's Name and Address

Phone (940) 696-8077

Sabre Operating, Inc.

P.O. Box 4848

Wichita Falls, TX 76308-0848

Oil/Gas Purchaser Kansas Gas Supply Co.

Date 10-15-99

Title _____

Signature _____

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 _____

Date _____

Authorized Signature

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

RECEIVED
STATE CORPORATION COMMISSION

Date _____

Authorized Signature

Form T1 7/94

Davis Ranch B

*LOCATION: SW NW SW Sec. 28-335-14W

API NO.
(YR DRLD/PRE '67)

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

WELL STATUS
(PROD/TA'D
ABANDONED)

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.