

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:

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KANSAS CORP COMM

[] Oil Lease: No. of Wells 999 SEP 23 A 11:55

[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 West Lexington

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

Identify: Emergency Pit ☐ Burn Pit ☐

Effective Date of Transfer 9-1-99

Lease Name Giles # 1-14

NE -NE - NE - Sec 14 T31S R 22 (W/E)

Legal Description of Lease: _____

NE/4 - Sec/ 14

County Clark

Production Zone(s) Mississippi

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. 03408

Contact Person: John D. Gibbs

Past Operator's Name and Address:

Phone: 580-226-6700

TriPower Resources, Inc.

Box 849

Date 9-9-99

Ardmore, Ok. 73402

Title President

Signature John D. Gibbs

New Operator's License No. Applied For

Contact Person Ron Jackson

32531

New Operator's Name and Address

Phone 940-656-8077

Sabre Operating Co. Inc.

Box 4848

Wichita Falls, Texas 76308-0848

Oil- Ultramar Diamond Shamrock
Oil/Gas Purchaser Gas-Oneok Gas Marketing Co.

Date 9-21-99

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 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 # _____

Date _____
Authorized Signature

Form T1 7/54

Giles

NE NE NE

API NO.
(YR DRLD/PRE '67) *

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

WELL STATUS
(PROD/TA'D
ABANDONED)

025,20,799

330 Circle 330
FSL/FNL

Gas

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 each lease. If a lease covers more than one section please indicate which section each well is located.

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1999 SEP 23 A 11: 58