

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 _____ **

[✓] Gas Lease: No. of Wells 1 **

** SIDE TWO MUST BE COMPLETED **

[] Saltwater Disposal Well - Docket No. _____
Spot Location: _____ feet from N/S Line

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

Field Name Hitch (Morrowan)

Effective Date of Transfer 9/11/99

Lease Name Hitch 1-25

Sec 25 T 32S R 34 W/E

Legal Description of Lease: W/2, NW/4
+ SW/4 Sec 25/32S/34W (Also, W/2 and SW/4 of Sec 24)

County Seward

Production Zone(s) Morrowan

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. 03122 Contact Person: Vann A. Greeson

Past Operator's Name and Address: _____ Phone: (918) 595-1315

Vintage Petroleum, Inc.

4200 One Williams Center, Tulsa, OK 74172

Title Regulatory Specialist

Date 7/12/99

Signature Vann A. Greeson

New Operator's License No. 5363

Contact Person DANA WREATH

New Operator's Name and Address

Phone (316)265-3311

BEREXCO, INC.

100 N. BROADWAY, STE. 970

WICHITA, KS 67202

Oil/Gas Purchaser _____

Date 8/11/99

Title ATTORNEY-IN-FACT

Signature Dana Wreath

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 # _____.

Date _____ Recommended action _____
Authorized Signature _____

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

Date _____ Authorized Signature _____
STATE CORPORATION COMMISSION Form T1 7/94

MUST BE FILED FOR ALL WELLS

T1 7/94

*LEASE NAME

Hitch *LOCATION: Sec. 25-32S-34W

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/MSW)

WELL STATUS
(PROD/TAB'D
ABANDONED)

1-25

15-175-20997

660'

Circle
FSL/FNL

1320

Circle
FEL/FWL

Gas

Flowing

FSL/FNL

FEL/FWL

FSL/FNL

FEL/FWL

FSL/FNL

FEL/FWL

FSL/FNL

FEL/FWL

FSL/FNL

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FEL/FWL

A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY