

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

RECEIVED
KANSAS CORP COMM

Check Applicable Boxes:

1999 SEP 27 P 1:55

[] 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 Mustang

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

Identify: Emergency Pit ☐ Burn Pit ☐

Effective Date of Transfer 9/15/99

Lease Name Soupiset #1-10

W/2 -SE -NE - Sec 10 T 33 R 43 (W/E

Legal Description of Lease: _____

Section 10-33S-43W

County Morton

Production Zone(s) Morrow

Injection Zone(s) None

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

Storage Pit ☐ Drill Pit ☐

Past Operator's License No. 50HT004030699 Contact Person: Malik Husein

Past Operator's Name and Address: Phone: (918) 749-7480

Mrs. Shahraz Husein
Shazi Petroleum, Inc.
2651 E. 21st St.

Tulsa, OK 74114
Title President Signature [Signature]

New Operator's License No. 32448 Contact Person Kevin D. Creedon

New Operator's Name and Address Phone (918) 293-9052

Titan Resources Limited
8086 S. Yale Ave., Suite 150
Tulsa, OK 74136

Date 9/22/99

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 _____

Date _____ Authorized Signature _____

Form T1 7/94

