REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION AUTHORIZATION OR TRANSFER OF SURFACE POND PERMIT	CONSERVATION DIVISION  130 S MARKET, ROOM 2078
*****	WICHITA, KANSAS 67202
***************************************	
Check Applicable Boxes:	Effective Date of Transfer 10/01/95
[ ] Oil Lease: No. of Wells **	Lease NameMyers
[X] Gas Lease: No. of Wells 1 **  ** SIDE TWO MUST BE COMPLETED **	NE Sec 27 T 32 R40 W/# Legal Description of Lease:
[ ] Saltwater Disposal Well - Docket No.	
Spot Location: feet from N/S Li feet from E/W Li	ne
[ ] Enhanced Recovery Proj. Docket No	County Morton
Entire project: Yes/No	
Entire project: Yes/No Number of injection wells**	
Field Name Kinsler	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
(API No. If Drill Pit)	
Identify: Emergency Pit Burn Pit	Storage Pit Drill Pit D
**********	
Past Operator's License No. 3871 Con	ntact Person: Earl Ringeisen
Past Operator's Name and Address: Photographic Hugoton Energy Corporation	
301 N. Main, Suite 1900 Da	te9/21/95
Wichita, KS 67202	600
Title Vice President Operations Si	gnature Carl Singlish
New Operator's License No. 31298 Co	ntact Person
New Operator's Name and Address Ph	one 405-765-8010
C15 01	
Porsca Org. Oxlahoma Da	1/Gas Purchaser
Ol N. 4 . Sc. a de Lo	te October IV, 1995
David Oxa, Oxlahoma	CE OCTOBER 1
Title OWNIN 7460 Si	gnature
*****	*******
ACKNOWLEDGEMENT OF TRANSFER: The above rec	mest for transfer of injection authorization
surface pond permit # has been n	noted, approved and duly recorded in the record
of the Kansas Corporation Commission. This	acknowledgement of transfer pertains to Kansa
Corporation Commission records only and does injection well(s) or pond permit.	not convey any ownership interest in the abov
injection well(s) or pond permit.	
is acknowledged	is acknowledged as the
	ew operator of the above named lease containi:
	ne surface pond permitted by
. Recommended action	
Dato	ate
Date Date Date Date Date Date Authorized Signature	Authorized Signature
	√) Form T1 7/
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															L	WELL NO.	*LEASE NAME
															SPUD 5/1/61	API NO. (YR DRLD/PRE '67)	Myers
FSL/FNL FEL/FWL	FSL/FNLFEL/FWL	FSL/FNL FEL/FWL	Circle 1980 FSL/相相 1980 ##推進/FWL	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)	*LOCATION:												
															Gas	TYPE OF WELL (OIL/GAS INJ/WSW)	
																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 cach lease. If a lease covers more than one section please indicate which section each well is located.