

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 11-1-96

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

Lease Name WINCHELL #1-24

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

_____ - _____ - _____ Sec 24 T 33S R 32W W/E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: _____

[] Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N/S Line

SECTION 24, T33S, R32W, C NE/4

_____ feet from E/W Line

[] Enhanced Recovery Proj. Docket No. _____

County SEWARD COUNTY, KANSAS

Entire project: Yes/No

Production Zone(s) CHASE

Number of injection wells _____ **

Field Name _____

Injection Zone(s) _____

Surface Pond Permit # _____

_____ Feet from N/S Line of Section

(API No. If Drill Pit) _____

_____ Feet from E/W Line of Section

Identify: Emergency Pit ☐

Burn Pit ☐

Storage Pit ☐

Drill Pit ☐

Past Operator's License No. 31407

Contact Person: LENIS SIMPSON

Past Operator's Name and Address:

Phone: (806) 659-2952

Athena Energy, Inc.

Date December 9, 1996

P. O. Box 100

Spearman, Texas 79081

Title President

Signature Lenis Simpson

New Operator's License No. 8222

Contact Person Michael Paulk

New Operator's Name and Address

Phone (918) 749-5666

Gothic Energy Corporation

Oil/Gas Purchaser Aurora Natural Gas

5727 South Lewis Ave., Suite 700

Date 12-31-96

Tulsa, Oklahoma 74105-7148

Title President

Signature Michael Paulk

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 _____

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

Date _____

Authorized Signature

Date _____

Authorized Signature

Form T1 7/94

MUST BE FILED FOR ALL WELLS

***LOCATION:** Sec. 24, T33S, R32W, Seward County, KS

Winchell #1-24

*LEASE NAME

API NO.

(YR DRLD/PRE '67) -

FOOTAGE FROM SECTION LINE

(i.e. FSL=Feet from South Line)

TYPE OF WELL
(OIL/GAS
INJ/WSW)

WELL STATUS
(PROD/TA'D
ABANDONED)

#1-24

Circle
FSL/FNL

**Circle
FEL/FWL**

Prod.

Gas

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.