

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

_____ feet from E/W Line

☐ Enhanced Recovery Proj. Docket No. _____

Entire project: ☐ Yes ☐ No

Number of injection wells _____ **

Field Name Will-Bros

Effective Date of Transfer 11/1/98

Lease Name Williams

 - NW - NW - NE Sec 9 T 31S R 40 (W)E

Legal Description of Lease: NE/4 of Section 9

County Morton

Production Zone(s) Morrow

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. 5703 ✓ Contact Person: Robert L. Cornelius

Past Operator's Name and Address Phone 806/353-9837

J. M. Huber Corporation

7120 I-40 West, Suite 200 Date 10/30/98

Amarillo, Texas 79106

Title Vice President Panhandle Operations Signature Robert L. Cornelius

New Operator's License No. 31269 ✓ Contact Person: Jarvis Hensley

New Operator's Name and Address Phone 918/481-6020

Belco Energy Corporation

8908 South Yale, Suite 340

Tulsa, Oklahoma 74137

Title Vice President Operations Signature Jarvis A. Hensley

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 of the above named lease containing inject fluids as authorized by Docket # _____ the surface pond permitted by # _____. Recommended action _____

Date _____ Date _____

Authorized Signature

Authorized Signature

MUST BE FILED FOR ALL WELLS

* LEASE NAME Williams

* LOCATION: Section 9-T31S-R40W

API NO.

WELL NO.	(YR DRLD/PRE '67)
1	1967
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99	1967
100	1967

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

TYPE OF WELL	WELL STATUS
(OIL/GAS INJ/WSW)	(PROD/TA'D ABANDONED)

9-1
15-129-20903

Circle 330 Circle 2310 Circle FEL/FWL
FSL/FNL

FSL/FNL _____ FEL/FWL _____

FSL/FNL _____ FFL/FWL _____

FSL/FNL FFI/FWI

FSL/FNL FFI /FWI

FSL/FNL FFI /FWI

FSL/FNL EEI /EWI

FSL/FNL FFI/FWI

$$\frac{FSL}{FNL} \quad \frac{FEI}{FEI} / \frac{FNL}{FEI}$$

FSL/FNL FFI/FWI

FSL/FNL FFI /EWI

FSL/FNL FFI /FWI

FSL/FNL FFI /FWI

FSL/FNL FEI /EWI

FSL/FNL FEI /EWI

FSL/FNL FEI /EWI

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.