

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

* Effective Date of Transfer 12-1-96

Check Applicable Boxes:

Lease Name Garden City #3

[] Oil Lease: No. of Wells _____

- -NE Sec. 19 T. 24 S. R. 32 (W) W

[X] Gas Lease: No. of Wells 1

Legal Description of Lease: Northeast
Quarter of section: 19-T24S-R32W

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

County Finney

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

Production Zone(s) Krider

Injection Zone(s) _____

Field Name Hugoton (infill)

Surface Pond Permit # _____

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

Identify: Emergency Pit ☐

Burn Pit ☐

Storage Pit ☐

List API#'s on all post-1967 wells transferred with lease: _____

Past Operator's License No. 8996

Contact Person: Daniel L. Dalke

Past Operator's Name and Address:

Phone: 316/275-2963

Mid-Continent Resources, Inc.

* Date 12/18/96

PO Box 399

* Signature [Signature]

Garden City, KS 67846

Title Controller

New Operator's License No. 4058

Contact Person Cecil O'Brate

Phone 316/275-9231

Oil/Gas Purchaser NNG

* Date 12/18/96

* Signature [Signature]

New Operator's Name and Address

American Warrior, Inc.

PO Box 399

Garden City, KS. 67846

Title President

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 12-19-96
Authorized Signature _____

*LOCATION: 19-24-32

API NO.	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)
(YR DRLD/PRE '67)	

WELL STATUS
(PROD/TA'D
ABANDONED)

[illegible]

*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.