

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, KS 67202

Check Applicable Boxes:

[] 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
Spot Location: _____ feet from E/W Line

[] Enhanced Recovery Proj. Docket No. _____
Entire Project: _____
Number of injection wells _____ **

Field Name Aetna

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

Identify: Emergency Pit ☐ Burn Pit ☐

Effective Date of Transfer 12/15/98

Lease Name Baier

SW SW NE- Sec 23 T 33S R 14W

Legal Description of Lease: _____

County Barber

Production Zone(s) Mississippian

Injection Zone(s) _____

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

Storage Pit ☐ Drill Pit ☐

Past Operator's License No. 32334

Past Operator's Name and Address

Chesapeake Operating, Inc.
P. O. Box 18496
Oklahoma City, OK 73154-0496

Contact Person Frank E. Jordan

Phone 405-848-8000

Date 12-15-98

Title Vice President of Operations

Signature Frank E. Jordan

New Operator's License No. 5030

Contact Person W. R. Horigan

New Operator's Name and Address

Vess Oil Corporation
8100 E. 22nd No. Bldg. 300
Wichita- KS 67226

Phone (316) 682-1537

Oil / Gas Purchaser NCR

Date 12/15/98

Title Vice President, Operations

Signature W. R. Horigan

ACKNOWLEDGEMENT OF TRANSFER: The above request for transfer of injection authorization surface pond permit # _____ has been noted, approved and duly recorded in the record 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 _____

* LOCATION: SW SW NE 23 33S 14W

[illegible]

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.