REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION AUTHORIZATIO OR TRANSFER OF SURFACE POND PERMIT	ON COMMISSION
Check Applicable Boxes:	Effective Date of Transfer 2-1-94
(X) Oil Lease: No. of Wells _/ **	Lease Name Antenew
[ ] Gas Lease: No. of Wells **  ** SIDE TWO MUST BE COMPLETED **	Sec_// T_/9 R 26 W/E
[ ] Saltwater Disposal Well - Docket No.  Spot Location: feet from N/ feet from E/	S Line SE/4
[ ] Enhanced Recovery Proj. Docket No Entire project: Yes/No Number of injection wells **	Production Zone(s)
Field Name	Injection Zone(s)
************	***********
Surface Pond Permit # (API No. If Drill P	Feet from N/S Line of Section Feet from E/W Line of Section
Identify: Emergency Pit Burn Pit	
************	****
Past Operator's License No. 4/0/	Contact Person: Dofby & Bland
Past Operator's Name and Address:  flockhawl muy lost  flow 1910 Dunt Derl, KD 67530	Phone: (316) 792-814/  Date 3-22-95
Title Chaiman of the Board	Signature Dand as part Chips
New Operator's License No. 31410	Contact Person Jolly & Black
New Operator's Name and AddressSTATE Con Sec.	Phone (316) 753 792-814/
New Operator's Name and Address TATE CORPORATION APR APR 31	NGNI/Gas Purchaser leaveek
Gristonal KS 67530	Pate 95 (0)
Title / Mechan William	Signature De Tilo
of the Kansas Corporation Commission. Th	request for transfer of injection authorization, n noted, approved and duly recorded in the records is acknowledgement of transfer pertains to Kansasses not convey any ownership interest in the above
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 #
DateAuthorized Signature	DateAuthorized Signature Form T1 7/94
	1 1/34