REQUEST FOR CHANGE OF OPERATOR KANSAS CORPORATION COMMISSION TRANSFER OF INJECTION AUTHORIZATION CONSERVATION DIVISION OR TRANSFER OF SURFACE POND PERMIT 130 S MARKET, ROOM 2078 070198_Bird_A.pdf WICHITA, KANSAS 67202 12DOZ: 119229 Effective Date of Transfer ___7/1/98_ Check Applicable Boxes: Lease Name BIRD "A" [X] Oil Lease: No. of Wells $\frac{1}{1}$ [HW 2 7 190] [] Gas Lease: No. of Wells ______ -NE | SE - NE | Sec | 13 | T 7 | R | 18 | W/ ** SIDE TWO MUST BE COMPLETED ** Legal Description of Lease: [] Saltwater Disposal Well - Docket No. Spot Location: feet from N/S Line feet from E/W Line [] Enhanced Recovery Proj. Docket No_____ County ROOKS Entire project: Yes/No Number of injection wells ** Production Zone(s) ARBUCKLE Field Name RIFFE _ Injection Zone(s) ____ ***************************** Feet from N/S Line of Section Feet from E/W Line of Section Surface Pond Permit # _ (API No. If Drill Pit) Burn Pit Storage Pit Drill Pit Identify: Emergency Pit | Past Operator's License No. 31887 Contact Person: BILLY W. LEE Phone: _____ (713) 658-9444 Past Operator's Name and Address: AMERAC ENERGY CORPORATION 1201 LOUISIANA, SUITE 3350 Date ____ 7-8-98 HOUSTON, TX 77002

Title Vice President - Engineering Signature **************** New Operator's License No. ____31566 Contact Person Christa Trujillo New Operator's Name and Address (303) 595-9251 Phone _____ BENCHMARK OIL & GAS CORPORATION 1515 ARAPAHOE STREET, SUITE 580 Oil/Gas Purchaser NCRA DENVER, CO 80202 Date 7/21/98 President Signature ***************** ACKNOWLEDGEMENT OF TRANSFER: The above request for transfer of injection authorization surface pond permit # _____ has been noted, approved and duly recorded in the reco: of the Kansas Corporation Commission. This acknowledgement of transfer pertains to Kans Corporation Commission records only and does not convey any ownership interest in the abo injection well(s) or pond permit. ____ is acknowledged is acknowledged as : as the new operator and may continue to new operator of the above named lease contain: inject fluids as authorized by Docket # the surface pond permitted by #_____ _____. Recommended action ____

Date

Authorized Signature

CPC Form T1 7,

Date _______Authorized Signature

SE NAME	API NO. (YR DRLD/PRE '67).	*LOCATION: **LOCATION: **LOCAT	TYPE OF WELL (OIL/GAS INJ/WSW)	WELL STATUS (PROD/TA'D ABANDONED)
A	15-163-21911	Circle Circle RELYRNE	011	Prod
		FSL/FNL FEL/FWL		
İ		FSL/FNL FEL/FWL		
		FSL/FNLFEL/FWL		
		FSL/FNL FEL/FWL		
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A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

h lease. If a lease covers more than one section please indicate which section each well is located. en transferring a unit which consists of more than one lease please file a separate side two for