REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION AUTHORIZATIO OR TRANSFER OF SURFACE POND PERMIT	N C	CANSAS COR CONSERVATI 130 S MARK	PORATION COMMISSION ON DIVISION ET, ROOM 2078 ANSAS 67202
Check Applicable Boxes:		ffective Dat	ce of Transfer 1-1-00
[X ] Oil Lease: No. of Wells 23 **		ease Name _W	liles
[ ] Gas Lease: No. of Wells **  ** SIDE TWO MUST BE COMPLETED **			Sec 31 T 26 R 18 W/E
[ ] Saltwater Disposal Well - Docket No.  Spot Location: feet from N/S Line			
feet from E/  [ ] Enhanced Recovery Proj. Docket No E21  Entire project: Yes/No B-2  Number of injection wells 4 **	-224 cc <del>1-335</del>	ounty Alle	
Field Name	I	njection Zor	ne(s) Same
********	******	*****	******
Surface Pond Permit # (API No. If Drill P			et from N/S Line of Section
	_	ree	et from E/W Line of Section
Identify: Emergency Pit Burn Pit In Family Transf		rage Pit	Drill Pit
**************************************	******	*****************************	**************************************
Past Operator's License No. 3529	Contact P	erson:	
Past Operator's Name and Address:	Phone:	316-431-06	17
Pup Oil 303 South Wilson Chanute, Kansas 66720 TitleOwner	Date 3-3	7777	
************		*****	****
New Operator's License No. 31751	Contact P	erson Sam	ie
New Operator's Name and Address John E. Galemore P.O. Box 453 Iola, Kansas 66749	Phone	918-629-17	776
	Oil/Gas P	urchaser Pl	ains Marketing, Inc.
	Date3	-30-00	A - A -
Title Owner	Signature	John 2	1 Silven
inject fluids as authorized by Docket #	n noted, a is acknowl pes not con	pproved and edgement of nvey any own	duly recorded in the record. transfer pertains to Kansas
E>21,224 . Recommended action			STATE (1999) To the commission
Date 4-11-00 mile Empelliers &	Date		APR 1 0 2000
Authorized (Signature C		A	uthorized Signature