REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION AUTHORIZATION OR TRANSFER OF SURFACE POND PERMIT							
***************	KDOR: 116779						
Check Applicable Boxes:	Effective Date of Transfer $8/1/95$						
[x] Oil Lease: No. of Wells 2 **	Lease Name WINKLEPLECK						
[] Gas Lease: No. of Wells ** ** SIDE TWO MUST BE COMPLETED **	Sec 12 T 27 R 16 W/Bk Legal Description of Lease: SE/4						
[] Saltwater Disposal Well - Docket No. Spot Location: feet from N/S feet from E/S	S Line						
[] Enhanced Recovery Proj. Docket No	County Kiowa						
Entire project: Yes/No Number of injection wells **	Production Zone(s) Marm/Kind/Miss						
Field Name Carver/Robbins/Fruit	Injection Zone(s)						

Surface Pond Permit # (API No. If Drill P	Feet from N/S Line of Section it) Feet from E/W Line of Section						
·							
Identify: Emergency Pit Burn Pit	Storage Pit Drill Pit						
***********	***************						
Past Operator's License No. 05414 Past operator's name and address:							
J. Mark Richardson	Phone: (316) 262-3192						
	Date 8-8-95						
Wichita, KS 67202							
Title Owner	Signature Mul Machadon						
New Operator's License No. 3208	Contact Person & Demnil						
New Operator's Name and Address	Phone 316-564-3422						
N Ken. Pet. Jr.	Oil/Gas Purchaser Fa/n STAD CORPORATION COMMISSION						
513 West 6ty Flinuar Ks. 67526	Date lole/95 OCT 1 2 100-						
Title Programmer.	Signature Conservation of Stone						
TITLE 1.00.	Signature Wishing Signature Wishing						
surface pond permit # has bee of the Kansas Corporation Commission. Th	request for transfer of injection authorization, n noted, approved and duly recorded in the recording acknowledgement of transfer pertains to Kansases 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	new operator of the above named lease containing						
DateAuthorized Signature	Date Authorized Signature						
Authorized Signature	Authorized Signature  Form T1 7/94						
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			į											2-12	WELL NO.	*LEASE NAME
														15-097-20838	API NO. (YR DRLD/PRE '67) ·	DinklePlack
FSL/FNL FEL/FWL	FSL/FNLFEL/FWL	FSL/FNL FEL/FWL	FSL/FNL FEL/FWL	FSL/FNL FEL/FWL	(60) (FSI)/FNL 350 (FEI)/FWL (60) (FEI)/FWL	FROM SECTION LINI SL=Feet from South Circle	*LOCATION: SE/4 12-275-16-kiowa									
														0 0	TYPE OF WELL (OIL/GAS INJ/WSW)	
														Prod	WELL STATUS (PROD/TA'D ABANDONED)	

## A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

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