TRANSFER OF INJECTION AUTHORIZATIO OR TRANSFER OF SURFACE POND PERMIT	130 S MARKET, ROOM 2078
Theck Applicable Boxes: 1000 OCT	WICHITA, KANSAS 67202
	0.4 2001 Effective Date of Transfer 08/01/01
[X] Oil Lease: No. of Wells KCC \	WICHITA Lease Name BELL
[] Gas Lease: No. of Wells ** ** SIDE TWO MUST BE COMPLETED **	Sec_24 T_27S R_02 W/X
[] Saltwater Disposal Well - Docket No.	
Spot Location: feet from N/ feet from E/	W Line
[] Enhanced Recovery Proj. Docket No Entire project: Yes/No	County SEDGWICK
Number of injection wells **	Production Zone(s) MISSISSIPPI
Field Name <u>CANNONBALL NORTH</u>	Injection Zone(s) N/A
Surface Pond Permit #	Feet from N/S line of social
(API No. If Drill P	Pit) Feet from E/W Line of Section
Identify: Emergency Pit Burn Pit	Storage Pit Drill Pit D
*************	*****************
Past Operator's License No. 6988	Contact Person: DALE R. OHL
Past Operator's Name and Address: SMITH OIL OPERATIONS	Phone: 620-663-6622
PO BOX 550	Date10/01/01
HUTCHINSON, KS 67504-0550 Title CONTROLLER	Signature Vale & Oll
***********	***********
New Operator's License No. 5822	Contact Person K Todal Allam
New Operator's Name and Address VAL ENERGY, INC.	Phone 316-263-6688
PO BOX 116 WICHITA, KS 67201-0116	Oil/Gas Purchaser Maclasken ail
_	Date 10/2/0/
Title <u>freselent</u>	Signature Kaldelow
ACKNOWLEDGEMENT OF TRANSFER: The above	****************
surface pond permit # has bee	request for transfer of injection authorization,
of the Kansas Corporation Commission. Th	en noted, approved and duly recorded in the records as acknowledgement of transfer pertains to Kansas
corporation Commission records only and de injection well(s) or pond permit.	oes 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 #
Date	
Authorized Signature	Date
EPAR 11/15/01 PHOD 27 2001 UIC 1/01	Authorized Signature Form T1 7/94
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KANSAS CORPORATION COMMISSION

REQUEST FOR CHANGE OF OPERATOR

MUST BE FILED FOR ALL WELLS

																WELL NO.	*LEASE NAME
															15-173-20,144	API NO. (YR DRLD/PRE '67)	BELL
															3630	FOOTAGE (i.e. FSI	*LOCATION:
FSL/FNL	Circle FSL/XXXX 29	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South	in: 24-27-2w														
FEL/FWL	Circle 2970 FEL/PAK	N LINE South Line)	36														
															OIL	TYPE OF WELL (OIL/GAS INJ/WSW)	
														0	HNY.	WELL STATUS (PROD/TA'D ABANDONED)	

A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

*When to sferring a unit which consists of more an one lease please file a separate sign two for