## Kansas Corporation Commission Oil & Gas Conservation Division

## RECEIVED OIL & GAS CONSERVATION DIVISION KCC DISTRICT #2 REQUEST FOR CHANGE OF OPERATOR

Form 7-1 June 2000 Form must be Typed Form must be Signed All blanks must be Filled

FEB 0 4 2002 PRANSFER OF INJECTION OR SURFACE POND PERMIT

Check Application Characters, KS	November 1 2001		
X Oil Lease: No. of Wells 3 **	Effective Date of Transfer: November 1, 2001		
Gas Lease: No. of Wells**	Lease Name: ENSZ		
** Side Two Must Be Completed.	E/2 NE/4 - Sec. 31 Twp. 20 R. 5 FXW		
Saltwater Disposal Well - Docket No.	Legal Description of Lease:		
Spot Location:feet from N / S Line	E/2 of the NE/4		
feet from E / W Line	D/2 OF the NB/ 4		
Enhanced Recovery Project Docket No			
Entire Project: Yes No	County: McPherson  Production Zone(s): Miss.		
Number of Injection Wells**			
Field Name: Bornholdt	Injection Zone(s):		
Surface Pond Permit #	feet from N / S Line of Section		
(API # If Drill Pit)	feet from E / W Line of Section		
Identify: Emergency Pit Burn Pit	Storage Pit Drill Pit		
Past Operator's License No. 32081	Contact Person: George Saling		
Past Operator's Name & Address: Smokey Valley Res., ]	Inc <sub>Phone:</sub> 620.938.2470		
P.O. Box 199, Chase, KS 67524	Date: January 24, 2002		
Title: President	Signature Hay Salo		
New Operator's License No. 32005	Contact Person: Keith Huddleston		
New Operator's Name & Address: Kera-Oil	Phone: 620.664.6558		
3406 E 28th	Oil / Gas Purchaser: NCRA		
Hutchinson, KS 67502	Date: 1-31-02		
Title:	Signature: Hunder Signature: H		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pond permit # has been		
	oration Commission. This acknowledgment of transfer pertains to Kansas		
Corporation Commission records only and does not convey any ownership			
is acknowleged as the			
	is acknowleged as the		
new operator and may continue to inject fluids as authorized by	new operator of the above named lease containing the surface pond		
Docket # Recommended action:	permitted by #		
Date:	Date:		
Authorized Signature	Authorized Signature		



## Must Be Filed For All Wells

* Lease Name	* Lease Name:ENSZ		* Location:		E/2 NE/4 of 31-20-5W	
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
1	15-1/3-20778	Circle 330FSLFNL	Circle	Oil	TA'D	
2	18-113-21007		990 EDFWL	Oil	Prod.	
3	15-113-21128	1320 FSLEND	330 FEDFWL	Oi1	Prod.	
		- FSL/FNL	FEL/FWL			
<del></del>		FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
-		FSL/FNL	FEL/FWL			
		FSL/FNL				
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		F\$L/FNL	FEL/FWL			
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		F\$L/FNL	FEL/FWL			
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A separate sheet may be attached if necessary

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