

REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION AUTHORIZATION
OR TRANSFER OF SURFACE POND PERMIT

Check Applicable Boxes:

[] Oil Lease: No. of Wells _____ **

[X] Gas Lease: No. of Wells 1 **

** SIDE 2 MUST BE COMPLETED **

[] Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N/S Line

_____ feet from E/W Line

[] Enhanced Recovery Proj. - Docket No. _____

Entire project: Yes/No

Number of injection wells _____ **

Field Name Aetna

Surface Pond Permit No. _____

(API No. if Drill Pit)

Identify: Emergency Pit [] Burn Pit []

Past Operator's License No. 31378

Past Operator's Name and Address:

Questar Exploration and Production Company

2601 Northwest Expressway, Suite 700E

Oklahoma City, Oklahoma 73112

Title Coordinator, Admin Services

New Operator's License No. 31566

New Operator's Name and Address:

Benchmark Oil & Gas Corporation

1515 Arapahoe Street, Suite 580

Denver, Colorado 80202

Title: President

ACKNOWLEDGEMENT OF TRANSFER: The above request for transfer of injection authorization, surface pond permit No. _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgement of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pond permit.

_____ is
acknowledged as the new operator and may continue to inject
fluids as authorized by Docket No. _____.
Recommended action _____

Date: _____

Authorized Signature

KANSAS CORPORATION COMMISSION
CONSERVATION DIVISION
130 S. MARKET, ROOM 2078
WICHITA, KANSAS 67202

Effective Date of Transfer 1/1/2000

Lease Name Thurman "A" 1-25

SW - NE - SE - _____ Sec 25 T 34 R 14 W

Legal Description of Lease: _____

SE4 Sec 25

County Barber

Production Zone(s) Mississippi

Injection Zone(s) _____

_____ Feet from N/S Line of Section

_____ Feet from E/W Line of Section

Storage Pit [] Drill Pit []

Contact Person: Bob Driver

Phone: 405-840-2761

Date: 12/23/99

Signature: [Signature]

Contact Person: Jay Johnson

Phone: (303) 595-9251

Oil/Gas Purchaser: _____

Date: 12/30/99

Signature: [Signature]

_____ is
acknowledged as the new operator of the above named
lease containing the surface pond permitted by No. _____

RECEIVED
STATE CORPORATION COMMISSION

Date: _____

FEB 22 2000

Authorized Signature

Form T1 7/94

T1 7/94

*LEASE NAME Thurman "A" *LOCATION SW-NE-SE Sec 25, T34S, R14W

WELL NO.	APII NO.	FOOTAGE FROM SECTION LINE (i.e. FSL = Feet from South Line)	TYPE OF WELL (OIL/GAS INJ/WSW)	WELL STATUS (PROD/TA'D ABANDONED)
1-25	12-11-56	1980' <u>Circle FSL/FNL</u>	660' <u>Circle FEL/FWL</u>	Gas Prod.
		<u>Circle FSL/FNL</u>	<u>Circle FEL/FWL</u>	
		<u>Circle FSL/FNL</u>	<u>Circle FEL/FWL</u>	
		<u>Circle FSL/FNL</u>	<u>Circle FEL/FWL</u>	
		<u>Circle FSL/FNL</u>	<u>Circle FEL/FWL</u>	
		<u>Circle FSL/FNL</u>	<u>Circle FEL/FWL</u>	
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		<u>Circle FSL/FNL</u>	<u>Circle FEL/FWL</u>	
		<u>Circle FSL/FNL</u>	<u>Circle FEL/FWL</u>	
		<u>Circle FSL/FNL</u>	<u>Circle FEL/FWL</u>	
		<u>Circle FSL/FNL</u>	<u>Circle FEL/FWL</u>	
		<u>Circle FSL/FNL</u>	<u>Circle FEL/FWL</u>	
		<u>Circle FSL/FNL</u>	<u>Circle FEL/FWL</u>	

A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

* When transferring a unit which consists of more than one lease, please file a separate Side 2 for each lease. If a lease covers more than one section, please indicate which section each well is located.