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

STATE CORPORATION COMMISSION CONSERVATION DIVISION 200 COLORADO DERBY BLDG. WICHITA, KS 67202

Effective Date of Transfer1-1-96	Check Applicable Boxes:
Lease Name Bell	[X] Oil Lease: No. of Wells 1
14 Sec. T21 S R7 W/E	[] Gas Lease: No. of Wells
Legal Description of Lease:	[] Saltwater Disposal Well - Docket No. Spot Location: feet from N/S Line
County Rice Production Zone(s) Mississippi	feet from E/W Line [] Enhanced Recovery Project Docket No. Entire project: Yes/No Number of injection wells
Injection Zone(s)	Field Name Wherry
**************	******************
Surface Pond Permit #	Feet from N/S Line of Section Feet from E/W Line of Section
Identify: Emergency Pit Burn Pit	Storage Pit
List API#'s on all post-1967 wells transf	erred with lease:
***	*****************
Past Operator's License No. 5517	Contact Person: Steven Ratzlaff
Past Operator's Name and Address:	Phone: 316-628-4664
Steven Ratzlaff	The same of the sa
Rt #2 Box 147	Date
** ***********************************	A A A A A A A A A A A A A A A A A A A
New Operator's License No. 5610	Contact Person Lonny Bruce
New Operator's Name and Address	Phone 316-241-2938 RECEIVED . KANSAS CORPORATION COMMISSION
1704 Limestone Road	Oil/Gas PurchaserN.C.R.A.
McPherson, KS 67460	Date 1-1-96 JAN 2 4 1996
Title <u>Managing Partner</u> ************************************	Signature Some CONSERVATION DIVISION WIGHTA, KS
ACKNOWLEDGEMENT OF TRANSFER: The above surface pond permit # has bee of the Kansas Corporation Commission. Th	request for transfer of injection authorization, in noted, approved and duly recorded in the records is acknowledgement of transfer pertains to Kansas des not convey any ownership interest in the above
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is acknowledged	is acknowledged as the
as the new operator and may continue to inject fluids as authorized by Docket # Recommended action	new operator of the above named lease containing the surface pond permitted by #
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Date with the same of the same	Date
Authorized Signature	Authorized Signature Form Tl 10/91