REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION AUTHORIZATION OR TRANSFER OF SURFACE POND PERMIT	KANSAS CORPORATION COMMISSION CONSERVATION DIVISION 130 S MARKET, ROOM 2078 PO 8 475 WICHITA, KANSAS 67202
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Check Applicable Boxes:	Effective Date of Transfer 01-01-97
[X] Oil Lease: No. of Wells **	Lease Name Bernstorf-Janke
[] Gas Lease: No. of Wells ** ** SIDE TWO MUST BE COMPLETED **	
	Legal Description of Lease:
[] Saltwater Disposal Well - Docket No. Spot Location: feet from N/S	Northeast Quarter (NE/4)
[X] Enhanced Recovery Proj. Docket No E25,	W Line
Entire project: Yes/No Number of injection wells**	Production Zone(s) Topeka, KS, Arbuckle
Field Name Kraft-Prusa	Injection Zone(s) Topeka, KC

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. 4707	Contact Person: Keith Lumpkins
	216 702 602
Past Operator's Name and Address:	Phone: 316-793-6032
Carl Boxberger Oil, Inc. 3111 10th Street #107	Date01-01-97
Great Bend, KS 67530	Date 01-01-37
Title Carl W. Boxberger, President	Signature (2/1/2, (1), Ay 22,
***************	*********
New Operator's License No	Contact Person Dennis V. Klima
New Operator's Name and Address	Phone316-587-3333
Klima Well Service, Inc.	
610 West Front P.O. Box 386	Oil/Gas Purchaser Koch Oil Company
Claflin, KS 67525	Date 01-01-97
	Date01-01-97
Title Dennis V. Klima, President	Signature Semus V. Klima
************	*********
	request for transfer of injection authorization,
surface pond permit # has bee	n noted, approved and duly recorded in the records
	is acknowledgement of transfer pertains to Kansas
	pes not convey any ownership interest in the above
injection well(s) or pond permit.	
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is acknowledged as the new operator and may continue to	new operator of the above named lease containing
inject fluids as authorized by Docket #	the surface pond permitted by #
. Recommended action	one particle point permitted by #
Manuscript Control of the Control of	
Date	Date
Authorized Signature	Authorized Signature
	Form T1 7/94

MUST BE FILED FOR ALL WELLS

*LEASE NAME	Bernstorf-Janke	*LOCATION: NE/4 of Sec. 33-16S+11W	·
WELL NO.	API NO. (YR DRLD/PRE '67) -	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line) (OIL/GAS INJ/WSW)	WELL STATUS (PROD/TA'D ABANDONED)
8	1946	Circle Circle 990 FSL/FNL 330 FEL/FWL Oil	Producing
9	1983	990 FSL/FNL 330 FEL/FWL Oil	Producing
1	<u>15-009-21,846</u> 1980	990 FSL/FNL990 FEL/FWLInj.	Injecting
		FSL/FNL FEL/FWL	
	!	FSL/FNLFEL/FWL	
-		FSL/FNLFEL/FWL	
	<u>}</u> ;	FSL/FNL FEL/FWL	-
		FSL/FNL FEL/FWL	-
	1 1	FSL/FNL FEL/FWL	
		FSL/FNL FEL/FWL	
	1	FSL/FNLFEL/FWL	
	,s2	FSL/FNL FEL/FWL	
		FSL/FNLFEL/FWL	
		FSL/FNL FEL/FWL	
		FSL/FNLFEL/FWL	
	· · · · · · · · · · · · · · · · · · ·	FSL/FNL FEL/FWL	

A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

*When transferring a unit which consists of more than one lease please file a separate side two for