

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
WICHITA, KANSAS 67202

Check Applicable Boxes:

January 3, 2000
Effective Date of Transfer

[] Oil Lease: No. of Wells ** Lease Name BOHLING #1-10 OWWO
[X] Gas Lease: No. of Wells 1 ** - C - SW - SE Sec 10 T 34 R 27 (W/E)
** SIDE TWO MUST BE COMPLETED **
[] Saltwater Disposal Well - Docket No. Legal Description of Lease: E/2; E/2 SW/4 & SE/4 NW/4 Sec. 10;
Spot Location: feet from N/S Line W/2 W/2 & NE/4 NW/4 Sec. 11-34S-27W
 feet from E/W Line
[] Enhanced Recovery Proj. Docket No. County Meade
Entire project: Yes/No
Number of injection wells ** Production Zone(s) Morrow/Chester
Field Name McKinney Injection Zone(s)

Surface Pond Permit # (API No. If Drill Pit) Feet from N/S Line of Section
 Feet from E/W Line of Section
Identify: Emergency Pit ☐ Burn Pit ☐ Storage Pit ☐ Drill Pit ☐ *sw*

Past Operator's License No. 5134 Contact Person: Jack L. Yinger

Past Operator's Name and Address: GRAHAM-MICHAELIS CORPORATION Phone: 316-264-8394
P.O.Box 247 Date January 3, 2000
Wichita, KS 67201 Signature Jack L. Yinger
Title Vice President

New Operator's License No. 5363 Contact Person Charles Spradlin

New Operator's Name and Address: BEREXCO, INC. Phone 316-265-3311
100 N. Broadway, Suite 970 Oil/Gas Purchaser
Wichita, KS 67201 Date January 3, 2000

Title Executive Vice President Signature Charles Spradlin

ACKNOWLEDGEMENT OF TRANSFER: The above request for transfer of injection authorization, surface pond permit # 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 #
_____. Recommended action _____

Date _____
Authorized Signature _____

_____ is acknowledged as the
new operator of the above named lease containing
the surface pond permitted by # _____

Date _____
Authorized Signature _____

Form T1 7/94

MUST BE FILED FOR ALL WELLS

SIDE 2

T1 7/94

*LEASE NAME BOHLING OWWO

*LOCATION _____

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)
#1-10 -Sec. 10	15-119-00101 9-13-62	660' <u>Circle</u> FSL/FNL	1980' <u>Circle</u> FEL/FWL	Gas
		FSL/FNL	FEL/FWL	Producing
		FSL/FNL	FEL/FWL	
		FSL/FNL	FEL/FWL	
		FSL/FNL	FEL/FWL	
		FSL/FNL	FEL/FWL	
		FSL/FNL	FEL/FWL	
		FSL/FNL	FEL/FWL	
		FSL/FNL	FEL/FWL	
		FSL/FNL	FEL/FWL	
		FSL/FNL	FEL/FWL	
		FSL/FNL	FEL/FWL	
		FSL/FNL	FEL/FWL	
		FSL/FNL	FEL/FWL	
		FSL/FNL	FEL/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 each lease. If a lease covers more than one section please indicate which section each well is located.