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:			Effectiv	nuary 3 re Date		
[ ] Oil Lease: No. of Wells **	L	ease Name	Kenned	dy /-/	15	
[X] Gas Lease: No. of Wells 1 **  ** SIDE TWO MUST BE COMPLETED **		SW	_SW sec_	15 <b>T</b> _3	1 R_	9 <b>W</b> F
[ ] Saltwater Disposal Well - Docket No. Spot Location: feet from N	/S Line	SW/4 Sec				
[ ] Enhanced Recovery Proj. Docket No	from E/W	County	Harper		1 - 2	-
Number of injection wells**		Production				
Field Name Spivey-Grabs		Injection	Zone(s)			
Surface Pond Permit #  (API No. If Drill P  Identify: Emergency Pit Burn Pi						1
****						12
Past Operator's License No. 5134	Contact	Person: _J	ack L. Yii	nger		. 37
Past Operator's Name and Address: GRAHAM-MICHAELIS CORPORATION		3			1 10	- 4
P.O.Box 247	Date	J	anuary 3,	2000	,	
Wichita, KS 67201 Title Vice President	Signatur	e	1ack	X 1/2	ng	*****
New Operator's License No5363	Contact	Person C/C	harles Sp:	radlin NGAS COR	PORATIO	/ED
New Operator's Name and Address BEREXCO, INC.		Purchaser _			N 06	2000
100 N. Broadway, Suite 970 Wichita, KS 67201				2000	. 45	11.
TitleExecutive Vice President	Signatur	e ///	las	1	KVA HOL WIGHITA	
**************************************	request f been not sion. Th only and ermit.	or transfe ed, approv is acknowl	r of inject ed and du edgement of convey any	ction a lly rec of trans y owners	uthori orded sfer p ship i	ization in the pertain interes
is acknowledged as the new operator and may continue to inject fluids as authorized by Docket #	new oper	ator of the		med lea	se cor	ntainin
. Recommended action						2
	Date		Authorize	1		
Date	1	1	Authorize	d Signa	ture	52
Authorized Signature  Authorized Signature  AR 1/24/00 PROD 410 UIC 2-2-00					Form	T1 7/9

T1 7/94

												#1-15	WELL NO.	*LEASE NAME
				y ==								15-077-00045	APII NO. (YR DRLD/PRE '67)	MEKennedy
FSL/FNL FEL/FWL	FSL/FNL FEL/FWL	FSL/FNL FEL/FWL	FSL/FNL FEL/FWL	FSL/FNLFEL/FWL	FSL/FNLFEL/FWL	FSL/FNLFEL/FWL	FSL/FNLFEL/FWL	FSL/FNL FEL/FWL	FSL/FNLFEL/FWL	FSL/FNLFEL/FWL	FSL/FNLFEL/FWL	Circle 2310' FSU/FNL 4950' FED/FWL	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)	*LOCATION
												Gas	TYPE OF WELL (OIL/GAS	5
												Active	WELL STATUS (PROD/TA'D ARANDONED)	

## A SEPARATE SHEET MAY BE ATTACHED IF NECESSARY

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