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

****

January 3, 2000
Effective Date of Transfer

Check Applicable Boxes:

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

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

Lease Name PEPPERD #1-20

___ - C - NE - SW Sec 20 T 31 R 17 (W) E

Legal Description of Lease: _____
All Section 20-31S-17W

County Comanche

Production Zone(s) Mississippi

Injection Zone(s) _____

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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 [ ]

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Past Operator's License No. 5134

Past Operator's Name and Address:
GRAHAM-MICHAELIS CORPORATION
P.O.Box 247
Wichita, KS 67201

Title Vice President

Contact Person: Jack L. Yinger

Phone: 316-264-8394

Date January 3, 2000

Signature Jack L Yinger

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New Operator's License No. 5363

New Operator's Name and Address
BEREXCO, INC.
100 N. Broadway, Suite 970
Wichita, KS 67201

Title Executive Vice President

Contact Person Charles Spradlin

Phone 316-265-3311

Oil/Gas Purchaser _____

Date January 3, 2000

Signature _____

RECEIVED
KANSAS CORPORATION COMMISSION
JAN 05 2000
CONSERVATION DIVISION
WICHITA, KS

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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

FEB 2 0 2000

EP&R 1/24/00 PROD FEB UIC 2-2-00

MUST BE FILED FOR ALL WELLS

SIDE 2

T1 7/94

*LEASE NAME PEPPERD *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)
#1-20	15-033-2006100	1980' Circle FSL/FNL 3300' Circle FEL/FWL	Gas	Producing
		FSL/FNL FEL/FWL		
		FSL/FNL FEL/FWL		
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		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.