

OK

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 _____ **

Lease Name REDMAN UNIT

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

-SW -NW -SE Sec 11 T 30 R 8 (W)E

** SIDE TWO MUST BE COMPLETED **

Legal Description of Lease: _____

[] Saltwater Disposal Well - Docket No. _____
Spot Location: _____ feet from N/S Line

Townsite of Spivey, KS. Section 11-30S-8W

_____ feet from E/W Line

[] Enhanced Recovery Proj. Docket No _____

County Kingman

Entire project: Yes/No

Production Zone(s) Mississippi

Number of injection wells _____ **

Field Name Spivey-Grabs

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

Past Operator's License No. 5134

Contact Person: Jack L. Yinger

Past Operator's Name and Address:

Phone: 316-264-8394

GRAHAM-MICHAELIS CORPORATION

Date January 3, 2000

P.O.Box 247

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

Phone 316-265-3311

BEREXCO, INC.

100 N. Broadway, Suite 970

Wichita, KS 67201

Oil/Gas Purchaser 1-6-00

Date January 3, 2000

Title Executive Vice President

Signature [Signature]

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 _____

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

Date _____

Authorized Signature

Date _____

Authorized Signature
STATE CORPORATION COMMISSION
Form T1 7/94

MAR 13 2000

CONSERVATION DIVISION
Wichita, Kansas

EP&R 3/23/2000 PROD APR 7 2000 HUC 5/01

MUST BE FILED FOR ALL WELLS

T1 7/94

REDMAN UNIT

*LEASE NAME _____ *LOCATION _____

WELL NO.	APII 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	7-9-57	1650' 4290' 2310' ^{Circle} <u>FEL/FWL</u>	Gas	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.

