

REQUEST FOR CHANGE OF OPERATOR	CONSERVATION DIVISION 22 A 11 34
TRANSFER OF INJECTION AUTHORIZATION	CONDERCYTHION BINGS
OR TRANSFER OF SURFACE POND PERMIT	130 S. MARKET, ROOM 2078
*******	WICHITA, KS. 67202
Check Applicable Boxes:	Effective Date of Transfer 2-15-1998
[] Oil Lease: No. of Wells 4 **	Lease Name Dickson
[] Gas Lease: No. of Wells** **SIDE TWO MUST BE COMPLETED** [] Saltwater Disposal Well - Docket No Spot Locationfeet from N/S Line	
feet from E/W Line [] Enhanced Recovery Project Docket No	County Harper
Entire Project: Yes/No Number of injection wells**	Production Zone(s) Mississippian
Field Name Spivey-Grabs	Injection Zone(s)
Surface Pond Permit #	Feet from N/S Line of Section Feet from E/W Line of Section
Identify: Emergency Pit [] Burn Pit []	Storage Pit []
**********	ATOM TO THE TOTAL TO THE TOTAL THE SHOULD BE AND A TOTAL TO THE SHOULD BE A TOTAL TO THE SHOULD
Past Operator's License No. 31532 Past Operator's Name and Address:	Contact Person: Steven C. Anderson Phone 316-636-1801
Bison Production Company 9320 E. Central Wichita, KS 67206	Date April 17, 1998
Title Vice President, Production	Signature
New Operator's License No. 31532 New Operator's Name and Address	Contact Person: Steven C. Anderson Phone 316-636-1801
Middle Bay Production Company, Inc. 9320 E. Central	Oil/Gas PurchaserNCRA/Warren
Wichita, KS 67206	Date April 17, 1998
Title Vice President, Production	Signature
ACKNOWLEDGEMENT OF TRANSFER: The abo	we request for transfer of injection authorization,
surface pond permit# has been noted, ap Corporation. This acknowledgement of transfer per and does not convey any ownership interest in the a	proved and duly recorded in the records of the Kansas rations to Kansas Corporation Commission records only bove injection well(s) or pond permit.
is acknowledged	is acknowledged as the new
as the new operator and may continue to inject	operator of the above named lease containing the
fluids as authorized by Docket #	surface pond permitted by #
DateAuthorized Signature	Date Authorized Signature
Authorized Signature	Authorized Signature

#1 02/2 #2 04/1 #3 04/1 #5 077-	*LEASE NAME Dickson WELL NO API NO (YR DRLD)
02/25/1954 <i>15-077-00/24</i> 04/1954 <i>15-077-10070</i> 04/1954 <i>15-077-10071</i> 04/1954 <i>15-077-10071</i> 077-213010000	Dickson API NO (YR DRLD/PRE'67)
2310 FNL & 2310 FWL NENENW 2310 FNL & 2310 FWL SE SE NW 330 FNL & 330 FWL NW NW NW 1650 NFL & 990 FWL	*LOCATION: NW/4 Sec. 8-T31S-R8W FOOTAGE FROM SEC. LINE TYPE OF WELL V (i.e. FSL= feet from south line) (Oil/Gas I FELEVIL) Circle Circle FSLEVIL) FELEVIL
0i1 0i1 0i1	C. 8-T31S-R8W TYPE OF WELL WELLSTATUS (Oil/Gas Inj/WSW)
Prod. Prod. Prod.	(Prod/TA'D Abandoned)

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.