|                                                                                                           | profil/ED                                                                                  |  |
|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|--|
| REQUEST FOR CHANGE OF OPERATOR                                                                            | STATE CORPORATION COMMISSION                                                               |  |
| TRANSFER OF INJECTION AUTHORIZATION                                                                       | CONSERVATION DIVISIONS CORP COM.                                                           |  |
| OR TRANSFER OF SURFACE POND PERMIT                                                                        | 130 S. MARKET, ROOM 2078                                                                   |  |
| ********                                                                                                  | WICHITA, KS. 67202 1998 APR 22 A 11: 35                                                    |  |
| Check Applicable Boxes:                                                                                   | Effective Date of Transfer 2-15-1998                                                       |  |
| [1] Oil Lease: No. of Wells 1 **                                                                          | Lease Name Warren A                                                                        |  |
| [ ] Gas Lease: No. of Wells** **SIDE TWO MUST BE COMPLETED**                                              | Sec_ 17T 31 R 8 W                                                                          |  |
| [1] Saltwater Disposal Well - Docket No. D-6653                                                           | Legal Description of Lease: NW/4                                                           |  |
| Spot Location 4620 feet from N/8×Line                                                                     | Logar Description of Least. Mil/ 1                                                         |  |
| 3300 feet from E/W Line                                                                                   | 11 12                                                                                      |  |
| [ ] Enhanced Recovery Project Docket No                                                                   | County Harper                                                                              |  |
| 3                                                                                                         |                                                                                            |  |
| Entire Project: Yes/No Number of injection wells **                                                       | Durdantian Zana(a) Mississippian                                                           |  |
| 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                                                              |  |
| 31.6                                                                                                      | Feet from E/W Line of Section                                                              |  |
| Identify: Emergency Pit [] Burn Pit []                                                                    | Storage Pit [ ]                                                                            |  |
| ***********                                                                                               | *********                                                                                  |  |
| Past Operator's License No. 31532                                                                         | Contact Person: Steven C. Anderson                                                         |  |
| Past Operator's Name and Address:                                                                         | Phone 316-636-1801                                                                         |  |
| Bison Production Company                                                                                  |                                                                                            |  |
| 9320 E. Central                                                                                           | Date April 17, 1998                                                                        |  |
| Wichita, KS 67206                                                                                         |                                                                                            |  |
| Title Vice President, Production                                                                          | Signature                                                                                  |  |
| ***********                                                                                               | ***********                                                                                |  |
| New Operator's License No. 31532                                                                          | Contact Person: Steven C. Anderson                                                         |  |
| New Operator's Name and Address                                                                           | Phone 316-636-1801                                                                         |  |
| Middle Bay Production Company, Inc.                                                                       | (1)                                                                                        |  |
| 9320 E. Central                                                                                           | Oil/Gas Purchaser Koch/Warren                                                              |  |
| Wichita, KS 67206                                                                                         | Date April 17, 1998                                                                        |  |
|                                                                                                           | Date April 17, 1998                                                                        |  |
| Title Vice President, Production                                                                          | Signature Mode                                                                             |  |
| ********                                                                                                  | ***********                                                                                |  |
| ACKNOWLEDGEMENT OF TRANSFER: The above                                                                    | ve request for transfer of injection authorization,                                        |  |
| surface pond permit# has been noted, app                                                                  | proved and duly recorded in the records of the Kansas                                      |  |
| Corporation. This acknowledgement of transfer per<br>and does not convey any ownership interest in the al | tains to Kansas Corporation Commission records only pove 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 #                                                                |  |
| Date                                                                                                      | Date                                                                                       |  |
| Authorized Signature                                                                                      | Authorized Signature                                                                       |  |

| #1A<br>#1                                       |                    | *LEASE NA<br>WELL NO                                                    |
|-------------------------------------------------|--------------------|-------------------------------------------------------------------------|
| 3-11-64<br>3-11-61<br>15-077- <b>WRU6-</b> 0001 | 15-077-15005-0000  | *LEASE NAME Warren A , WELL NO API NO (YR DRLD/PRE'67)                  |
| 4620 C NE NW<br>990 FNL                         | Circle<br>(FSL/FNL | *LOCATION: NW/4 FOOTAGE FROM SEC. LINE (i.e. FSL= feet from south line) |
| 3300<br>330 - 226                               | Oircle<br>(EEDFWL  | *LOCATION: NW/4 17-31S-8W GE FROM SEC. LINE  C= feet from south line)   |
| Oil/Gas<br>SWD                                  |                    | TYPE OF WELL WELLSTATUS<br>(Oil/Gas Inj/WSW)                            |
| Producing                                       | Abandoned)         | (Prod/TA'D                                                              |

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.