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:

[ ] 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 GREENWOOD GAS AREA

May 1, 2000 Effective Date of Transfer

Lease Name STOOPS 1-19

___-___-___-___ Sec 19 T 32S R 42 W/E

Legal Description of Lease: W/2 & NE/4 SEC 19; NW/4 SEC 20-32S-42W

County MORTON

Production Zone(s) TOPEKA (2707-3215')

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. 05337

Past Operator's Name and Address:

Nadel and Gussman
3200 First Place Tower
Tulsa, OK 74103

Title Comptroller

Contact Person: Bruce E. Alsup

Phone: 918/583-3333

Date July 17, 2000

Signature Bruce E Alsup

****

New Operator's License No. 32638

New Operator's Name and Address

Nadel and Gussman, L.L.C.
3200 First Place Tower
Tulsa, OK 74103

Title Comptroller

Contact Person Bruce E. Alsup

Phone 918/583-3333

Oil/Gas Purchaser CIG MERCHANT COMPANY

Date July 17, 2000

Signature Bruce E Alsup

****

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 #_____.

RECEIVED
KANSAS CORP COMM
2000 JUL 24 P 1:43

Date _____ Authorized Signature

Form T1 7/94

EP&R 9/29/00 PROD MAR 29 2001 UIC 11-16-00

T1 7/94

*LEASE NAME STOOPS 1-19 *LOCATION MORTON COUNTY

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)
1-19	15-129-10075	3960	Circle FSL/FNL	1320	Circle FEL/FWL	GAS	PROD
			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.