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

*******	WICHITA, KANSAS 67202
Effective Date of Transfer May 1, 1997	Check Applicable Boxes:
Lease Name Broiller AB	DOXES:
SENW sec2 <u>T</u> 32 s. R 35 w/E	[X] Gas Lease: No. of Wells
Legal Description of Lease: Center of he North Half of the Southeast Quarter f the Northwest Quarter	Spot Location: feet from N/S Line
County Stevens Production Zone(s) MISS	[] Enhanced Recovery Project Docket No. Entire project: Yes/No Number of injection wells
Injection Zone(s)	Dield W Towns
C	rield name Larrapee No.
Surface Pond Permit #	Feet from N/S Line of Section
	Feet from E/W Line of Section
Identify: Emergency Pit Burn Pit	Storage Pit
List API#'s on all post-1967 wells trans	ferred with lease:
****	*********
Past Operator's License No. 5941	Contact Person: George F. Rosel
Past Operator's Name and Address:	Phone: 316-624-4994
Rosel Energy, Inc. 30 South Clay	Date 6-24-97
Title President	Standard 1 1 1 1 1
**********	Signature 3
New Operator's License No. 4058	Contact PersonCecil O'Brate
New Operator's Name and Address	Phone 316/275-9231
American Warrior, Inc. P.O. Box 399	Oil/Gas Purchaser Aurora Nat'l Gas
Garden City, Kansas 67846	Date July 1 1997
Title President	Signature Och O'Brate

nas nee	request for transfer of injection authorization, n noted, approved and duly recorded in the records
The state of polacion continues on the	is acknowledgement of transfer pertains to Kansas pes not convey any ownership interest in the above
is acknowledged as the new operator and may continue to	new operator of the above named lease containing
inject fluids as authorized by Docket # Recommended action	the surface pond permitted by #
	(4) 102 State
PateAuthorized Signature	Date
==== Dagmacare	Authorized Signature Form T1 10/91

MUST BE FILED FOR ALL WELLS

ORIGI				#B-1	*LEASE NAME
				15-189-21, 127	Broiller API NO. (YR DRLD/PRE '67)
FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL	FSL/FNL FEL/FWL	FSL/FNL FEL/FWL FEL/FWL FEL/FWL FEL/FWL	FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL	Circle FSL/FNL 3300 FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL	*LOCATION: 2-32-35 FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)
				Gas	TYPE OF WELL (OIL/GAS INJ/WSW)
				2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	WELL STATUS (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.