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:	Effective Date of Transfer5-1-99
[X] Oil Lease: No. of Wells**	Lease NameThomas "A"
[] Gas Lease: No. Of Wells** ** SIDE TWO MUST BE COMPLETED **	Sec <u>12</u> T <u>19S</u> R <u>29</u> W/E
Saltwater Disposal Well - Docket No	Legal Description of Lease:
Spot Location: feet from N/S Line	SE/4 Section 12-19S-29W
feet from E/W Line	
[] Enhanced Recovery Proj. Docket No Entire Project: Yes/No	County Lane
Number of Injection Wells**	Production Zone (s) <u>LKC, Pleasanton</u>
Field NameHineman NW	Injection Zone (s)
Surface Pond Permit #	feet from N/S Line of Section
(API No. If Drill Pit)	feet from E/W Line of Section
Identify: Emergency Pit Burn Pit Storage ************************************	Pit
Past Operator's License No. 5393	Contact Person: Steve Frankamp
Past Operator's Name and Address:	
A.L. Abercrombie, Inc. 150 N. Main - #801	Phone(316) 262-1841
Wichita, Kansas 67202	Date5-3-99
Title Executive Vice President	Signature Skew Francis

New Operator's License No. 32457	Contact Person: Steve Frankamp
New Operator's Name and Address:	Phone(316) 262-1841
Abercrombie Energy, LLC	Oil/Gas PurchaserEott
150 N. Main - #801	n
Wichita, Kansas 67202	Date5-3-99
Title <u>President</u> ************************************	Signature Steve Vanuap
	A STATE OF THE STA
ACKNOWLEDGEMENT OF TRANSFER: The above request for trans	
nas been noted, approved and duly recorded in the r	ecords of the Kansas Corporation Commission. This

Docket # ______ Recommended action:

operator and may continue to inject fluids as authorized by

_____ is acknowledged as the new

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

...

Date _____Authorized Signature___

CONSERVATION DIVISION Wichita, Kansas

acknowledgement of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership in the

FORM T1 7/94

Authorized Signature___

above injection well (s) or pond permit.

MUST BE FILED FOR ALL WELLS

*Lease Name _	Thomas "A"	*Location	: <u>12-198-2</u>	29W			
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	15-101-20,274	510	Circle FSD/FNL _	660	Circle	Oil	TA
11.2	10120121		FSL/FNL				
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			FSL/FNL				
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,			FSL/FNL	7.	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.