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

**********	**** ANSAS CORP COMM		
Check Applicable Boxes:	Effective Date of Transfer 6-1-98		
[X] Oil Lease: No. of Wells **	Lease Name JAMES		
Gas Lease: No. of Wells**	Sec_26_ T_16S_R_29_ W		
** SIDE TWO MUST BE COMPLETED **			
	Legal Description of Lease:		
[X] Saltwater Disposal Well - Docket No. 19,498			
Spot Location: 4950 feet from N(S) Line	N/2		
36 30 feet from E/W Line	2		
[] Enhanced Recovery Proj. Docket No			
Entire Project: Yes/No			
Number of Injection Wells**	Production Zone(s) <u>Dakota/Lansing/KC</u>		
	2010(0) Danota Danoing IxO		
Field Name	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 PitBurn Pit			
	STATE		
***********	************		
Past Operator's License No. 9860 Conf	tact Person:Jerry Green		
	ne: (785) 625-5155		
	6-1-98		
P. O. Box 87	0-1-70		
Schoenchen, KS 67667			
Schoenenen, RS 07007			
	161 91		
	ature:		
***************	**********		
-	tact Person: Jonathan Allen		
New Operator's Name and Address: Phor	(785) 398–2673		
BlueRidge Petroleum Corporation Oil/O	Gas Purchaser NCRA		
P.O. Box 385	6-1-98		
Ness City, KS 67516			
	\sim		
Title Vice President Sign	ature: Mathan (Illan		
*************	######################################		
nermit # has been noted enground	request for transfer of injection authorization, surface pond		
Commission records only and does not as your and	and duly recorded in the record of the Kansas Corporation		
Commission records only and does not convey any owner	ship interest in the above injection well(s) or pond permit.		
is acknowledged as the new operator	is acknowledged as the new operator		
and may continue to inject fluids as authorized by Docket #	of the above named lease containing the surface pond permitted		
Recommended action	by #		
Date	Date		
Authorized Signature	Authorized Signature		

Form T1 7/94

MUST BE FILED FOR ALL WELLS

* LEASE NAME _	James	* LOCATION: N/2 Sec. 26-T16S-R29W				
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)	
		Circle	Circle			
1	1979	4950 (FSI/FNL	3630 FEL/FWL	SWDW	Active	
2	15-101-20,294	990 FSL/FNL	2310 FELFWL	Oil	Prod	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	***	FSL/FNL	FEL/FWL			
1 /		FSL/FNL	FEL/FWL		- T-4	
		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 SEDAD	FSL/FNL	FEL/FWL	ECECCA DV		

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.