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 Transfer August 1, 1985		
[x] Oil Lease: No. of Wells one **	Lease NameAdams #1		
[] Gas Lease: No. of Wells ** ** SIDE TWO MUST BE COMPLETED **			
[] Saltwater Disposal Well - Docket No feet from N/S feet from E/W			
[] Enhanced Recovery Proj. Docket No Entire project: Yes/No	County Seward		
Number of injection wells**	Production Zone(s) Lansing		
Field Name Kneeland	Injection_Zone(s)		
********	***********		
Surface Pond Permit #	Feet from N/S Line of Section		
(API No. If Drill P:	it) Feet from E/W Line of Section		
Identify: Emergency Pit Burn Pit	Storage Pit Drill Pit		
**********	*********		
Past Operator's License No. 30161	Contact Person: Mike Taylor		
	(105) 010 000		
Past Operator's Name and Address:	Phone: (405) 840-2700		
R. Clark Taylor 501 W. I-44, Suite 590			
Oklahoma City, OK 73118	Date August 20, 1996		
	11/2 201 4		
TitleIndependent Geologist	Signature K. Colout Jaylor		
New Operator's License No. 30161	Contact Person Mike Taylor		
New Operator's Name and Address	Phone (405) 840-2700		
r.c. Taylor Companies, Inc.	22. 6유		
501 W. I-44, Suite 590	Oil/Gas Purchaser Total Petroleum. Inc.		
Oklahoma City, OK 73118	Jayhawk Pipeline trasports through their pipeline.		
	Date August 20, 1996		
C	MI -tan 0 3		
Title Secretary/Treasurer	Signature / Mike fixa		
surface pond permit # has bee	request for transfer of injection authorization, on noted, approved and duly recorded in the recording acknowledgement of transfer pertains to Kansas		
Corporation Commission records only and de injection well(s) or pond permit.	oes not convey any ownership interest in the above		
is acknowledged	is acknowledged as the		
as the new operator and may continue to	new operator of the above named lease containing		
inject fluids as authorized by Docket #	the surface pond permitted by #		
. Recommended action			
Date	Date		
Authorized Signature	Authorized Signature		
	Form T1 7/94		

MUST BE FILED FOR ALL WELLS

*LEASE NAME	Adams #1	*LOCATION:		
WELL NO.	APT NO.	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)	TYPE OF WELL (OIL/GAS INJ/WSW)	WELL STATUS (PROD/TA'D ABANDONED)
Adams_#1	15-175-20081	Circle Circle 1980 FSI/FNL 660 FEL/FWL		Prod.
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		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.