

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:

[X] Oil Lease: No. of Wells 1 **

[] Gas Lease: No. of Wells _____ **

** 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 Garfield

Surface Pond Permit # _____
(API No. If Drill Pit)

Identify: Emergency Pit Burn Pit Storage Pit Drill Pit

Effective Date of Transfer 8-1-96

Lease Name KLEPPER

_____ - _____ - _____ Sec 32 T 22S R 17W W/E

Legal Description of Lease: _____
SOUTHEAST QUARTER SECTION

County Pawnee

Production Zone(s) Cong sand

Injection Zone(s) NA

_____ Feet from N/S Line of Section
_____ Feet from E/W Line of Section

Past Operator's License No. 31622

Past Operator's Name and Address:
Empire Exploration, Inc.
209 E. William
Wichita, KS 67202

Title J.M.Hadix - President

New Operator's License No. 30481

New Operator's Name and Address
Apollo Energies, Inc.
Route 1, Box 60
Kingman, KS 67068

Title Jim Byers - President

Contact Person: Doug Kilgariff

Phone: 316/265-4433

Date August 1, 1996

Signature [Signature]

Contact Person Jim Byers

Phone 316/532-2390

Oil/Gas Purchaser NCRA

Date 8-1-96

Signature [Signature]

RECEIVED
STATE CORPORATION COMMISSION
8-14-96
AUG 14 1996
CORPORATION COMMISSION
WICHITA, KANSAS

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 # _____

Date _____
Authorized Signature _____

MUST BE FILED FOR ALL WELLS

SIDE 2
T1 7/94

*LEASE NAME Kiepper

*LOCATION: 32-22s-17w Pawnee Co., KS

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/MSW)

WELL STATUS
(PROD/TA'D
ABANDONED)

#1 _____
10-3-56 _____
SWSWSE _____

330' _____
Circle _____
FSL/FNL _____

Oil

Prod

_____ FSL/FNL _____ FEL/FWL

_____ FSL/FNL _____ FEL/FWL

_____ FSL/FNL _____ FEL/FWL

_____ FSL/FNL _____ FEL/FWL

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_____ 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.