

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

KDOR: 110178

Effective Date of Transfer NOV. 1, 2000

Check Applicable Boxes:

[X] Oil Lease: No. of Wells 2 **

Lease Name MORAN

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

** SIDE TWO MUST BE COMPLETED **

Sec 30 T19S R 20W/E

[] Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N/S Line

_____ feet from E/W Line

Legal Description of Lease: NW / 4

[] Enhanced Recovery Proj. Docket No. _____

Entire Project: Yes/No

County RUSH

Number of Injection Wells _____ **

Production Zone(s) MISSISSIPPI

Field Name _____

Injection Zone(s) _____

Surface Pond Permit # _____

(API No. If Drill Pit)

_____ Feet from N/S Line of Section

_____ Feet from E/W Line of Section

Identify: Emergency Pit _____ Burn Pit _____ Storage Pit _____ Drill Pit _____

Past Operator's License No. 5228

Contact Person: LLOYD PARRISH

Past Operator's name and address:

Phone: (316) 263-8726

PARRISH CORP.

Date: NOVEMBER 1, 2000

110 S. MAIN #510

WICHITA, KS 67202-3745

Title president

Signature: Lloyd Parrish

New Operator's License No. 30601

Contact Person: DEAN BRITTING

New Operator's Name and Address:

Phone: 316-733-8997

Northstar Investments, Inc.

Oil/Gas Purchaser EQUIVA

13735 Pinnacle

Date: 11-15-00

Wichita, Kansas 67230-1545

Title PRESIDENT

Signature: Dean Britting

ACKNOWLEDGMENT OF TRANSFER: The above request for transfer of injection authorization, surface pond permit # _____ has been noted, approved and duly recorded in the record of the 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 _____

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

Date _____

Date _____

Authorized Signature _____

RECEIVED
STATE CORPORATION COMMISSION
Wichita, Kansas

Form T1 7/94

MUST BE FILED FOR ALL WELLS

* LEASE NAME Moran

* LOCATION: Nw/4 30-19-20w

WELL NO.	API NO. (YR DRLD/PRE '67)	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)	Circle	Circle	TYPE OF WELL (OIL/GAS INJ/WSW)	WELL STATUS (PROD/TA'D ABANDONED)
1	15-165-20,227 ✓	990	FSL/FNL	2310 FEL/FWL	Oil	Prod
2	15-165-20,289 ✓ 20259	1980	FSL/FNL	1980 FEL/FWL	Oil	Prod
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
			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 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.