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 November 1, 199						
[X] Oil Lease: No. of Wells 2 **	Lease Name Long "A"						
[] Gas Lease: No. of Wells ** ** SIDE TWO MUST BE COMPLETED **	Legal Description of Lease:						
[] Saltwater Disposal Well - Docket No. Spot Location: feet from N/S feet from E/W	Line W/Z NE/4						
[] Enhanced Recovery Proj. Docket No	County Stafford						
	Production Zone(s) Lansing - Kansas City						
Field Name Saundra							
Surface Pond Permit # (API No. If Drill Pi	Feet from N/S Line of Section						
·							
Identify: Emergency Pit Burn Pit							
**********	zzzzzzzzzzzzzzzzzzzzzzzzzzzzzzzzzzzzzz						
Past Operator's License No. 5141	Contact Person:						
Tabe operation to the second	Phone: 316-684-9777						
P. O. DOX /00940	Date November 8, 1995						
Wichita, Kansas 67278-0428 Title Vice-President	Signature Shevill Compton						
**************************************	Contact Person Kim Churchill						
	Phone 316-564-2279						
New Operator's Name and Address K. C. Operations Route #2, Box 113	Oil/Gas Purchaser Koch						
Ellinwood, Kansas 67526							
	Date November 8, 1995						
Title Owner	Signature Kom Churcol						
ACKNOWLEDGEMENT OF TRANSFER: The above surface pond permit # has been of the Kansas Corporation Commission. The	request for transfer of injection authorization, n noted, approved and duly recorded in the records is acknowledgement of transfer pertains to Kansas bes 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 Nhamed Olease Containing						
inject fluids as authorized by Docket #	the surface pond permitted by #						
. Recommended action	NOV 1 7 1995						
Date	Date CONSERVATION DIVISION						
DateAuthorized Signature	Authorized Signature						
	Porm T1 7/94						

MUST BE FILED FOR ALL WELLS

										27		2	_	WELL NO.	*LEASE NAME
												15-185-21724	15-185-21505	API NO. (YR DRLD/PRE '67)	Long "A"
FSL/FNL FEL/FWL	FSL/FNLFEL/FWL	FSL/FNLFEL/FWL	FSL/FNL FEL/FWL	FSL/FNL FEL/FWL	FSL/FNL FEL/FWL	165' FSL/FNL 1485' FEL/FWL	Circle 825' FSL/(FNL) 1485' FEL) FWL	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)	*LOCATION: $\frac{W}{2}$ NE/4, Sec. 22-21-12W, Stafford County, Kansas						
												011	0il	TYPE OF WELL (OIL/GAS INJ/WSW)	fford County, Kansas
												Prod.	TA'D	WELL STATUS (PROD/TA'D ABANDONED)	

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