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		
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Check Applicable Boxes:	PHIOCE OF TIMESTON		
[X] Oil Lease: No. of Wells 2 **	Lease Name <u>Herb Johnson</u>		
[] Gas Lease: No. of Wells ** ** SIDE TWO MUST BE COMPLETED **	sec_5 T_16S R_3 (W/E		
[] Saltwater Disposal Well - Docket No feet from N/S feet from E/W	Line NW NW/NE SW NW W2/NW/4		
[] Enhanced Recovery Proj. Docket No	County Saline		
Number of Injection wells	Production Zone(s) Maquoketa		
Field Name Salemsborg	Injection Zone(s)		
*********	Feet from N/S Line of Section		
Surface Pond Permit # (API No. If Drill Pi	Teet from E/W Line of Section		
Identify: Emergency Pit Burn Pit	Storage Pit Drill Pit		
**********	***************		
Past Operator's License No. 5563	Contact Person: Dennis Perera		
	216 CEA 2402		
Past Operator's Name and Address:	Phone: 316-654-3403		
D&R Oil Properties PO Box 241	Date		
Galva, KS 67443	1 Jana Horas		
Title	Signature / //////////////////////////////////		
************	Contact Person Jack Edwards		
New Operator's License No. 32495	Tack Edwards		
New Operator's Name and Address	Phone 316-241-5813		
Edwards Oil & Gas Box 961	Oil/Gas Purchaser Cooperative Refining, LLC		
McPherson, KS 67460	Date		
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Title	Signature		
ACKNOWLEDGEMENT OF TRANSFER: The above surface pond permit # has been of the Kansas Corporation Commission. The	request for transfer of injection authorization, in noted, approved and duly recorded in the recording acknowledgement of transfer pertains to Kansas		
Corporation Commission records only and do injection well(s) or pond permit.	oes not convey any ownership interest in the above		
is acknowledged			
as the new operator and may continue to inject fluids as authorized by Docket #	new operator of the above named lease containing		
Recommended action	FEB - 8 2000		
	FED - 0 2000		
Date	Date CONSERVATION DIVISION		
Authorized Signature	Wichita, Kansas Authorized Signature Form T1 7/9		
EP&R 2/22/2000 PRODER 7 200 3-2-00	1		

*LEASE NAME	Herb Johnson	*LOCATION:		
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)
Well#1 Well#2	15-169-20051 Drilled 1971 5-169-20084 Drilled 1978	Circle 23/0 Circle 330 FEL/FWL 560 FEL/FWL 330 FEL/FWL 330 FEL/FWL	<u>oil</u>	Producing
_Well#3		990 FSL/FNL 330 FEL/FWL		Plugged
		FSL/FNL FEL/FWL FSL/FNL FEL/FWL		
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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 to lease covers more than one section please indicate which section each well is located.