REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION AUTHORIZATION
OR TRANSFER OF SURFACE POND PERMIT

CONSERVATION DIVISION

130 S. Market - Room 2078

WICHITA, KANSAS 67202

Form T1 10/91

	7 20								
Effective Date of Transfer11/11/97	Check Applicable Boxes:								
Lease NameBloom #1-4	[] Oil Lease: No. of Wells								
C-SW-SW Sec4_ T33s. R31WE	[X] Gas Lease: No. of Wells1								
Legal Description of Lease: _S/2 ofSection 4_	[] Saltwater Disposal Well - Docket No. Spot Location: feet from N/S Line								
CountySeward	feet from E/W Line [] Enhanced Recovery Project Docket No. Entire project: Yes/No								
Production Zone(s)Chase	Number of injection wells								
Injection Zone(s)	Field NameWildcat								
Surface Pond Permit #	Feet from N/S Line of Section Feet from E/W Line of Section								
	Feet 110m By w Bine of Beccion								
Identify: Emergency Pit Burn Pit	Storage Pit								
List API#'s on all post-1967 wells trans	ferred with lease:								
************	****************								
Past Operator's License No9953	Contact Person:Bud Harris								
Past Operator's Name and Address: Harris Oil and Gas Company	Phone:(303)293-8838								
1125 17th Street, Suite 2290 Denver, Colorado 80202	DateNovember 10, 1997								
TitlePresident	Signature W.G. Hamil								

New Operator's License No6568	Contact Person Charlotte Van Valkenburg								
New Operator's Name and Address	Phone 918-491-4314								
Kaiser-Francis Oil Company P.O. Box 21468	Oil/Gas Purchaser Gas Energy Development								
Tulsa, Oklahoma 74121-1468	11/14/07								
	Date 11/14/97								
Title Technical Coordinator	Signature an falkenbu								
surface pond permit # has be of the Kansas Corporation Commission. T	request for transfer of injection authorization, en noted, approved and duly recorded in the records his acknowledgement of transfer pertains to Kansas 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 #									
Recommended action									
Date	Date								
Authorized Signature	Authorized Signature								

							200								 	WELL NO.	*LEASE NAME
		man and a second)		8		21523000 15-175-2 153000 0	API NO. (YR DRLD/PRE '67)	Bloom #1-4
FGT./FNT. FFT./FWT.	FSL/FNL FEL/FWL	FSL/FNL FEL/FWL	FSL/FWL FEL/FWL	FSL/FWL FEL/FWL	FSL/FNL FEL/FWL	Circle Circle FEL/FWL)	FOOTAGE FROM SECTION LINE (i.e. FSL=Feet from South Line)	*LOCATION: C-SW-SW, Seward County,									
	* ==												,		Gas	TYPE OF WELL (OIL/GAS INJ/WSW)	. Kansas
															Producing	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 each lease. If a lease covers more than one section please indicate which section each well is located.