*	OR TRANSFER OF INJECTION AUTHORIZATION OR TRANSFER OF SURFACE POND PERMIT	CONSERVATION DIVISION 130 S MARKET, ROOM 2078 WICHITA, KANSAS 67202				
	*************************	***				
	Check Applicable Boxes:  1999 DEC -6	KITECTIVE DATE OF Transfer 1//1/99				
	[X] Oil Lease: No. of Wells 3 **	Lease Name				
	[ ] Gas Lease: No. of Wells STATE CORPORATION  ** SIDE TWO MUST BE COMPLETED **	COMMISSION Sec 29 T 34S R 31 W/S				
	JAN 27	2000 Legal Description of Lease:				
	Spot Location: feet from My feet from the spot feet feet from the spot feet feet from the spot feet feet feet feet feet feet feet fe	NE/4 & S/2 of Sec. 29-34S-31W				
	[Y] Enhanced Recovery Proj. Docket No E-25,					
	Number of injection wells**	Production Zone(s) LKC/Marmaton				
	Field Name Bluebell					
	Surface Pond Permit #	Feet from N/S Line of Section				
	(API No. If Drill P					
	Identify: Emergency Pit Burn Pit	Storage Pit Drill Pit				
	************	**********				
	Past Operator's License No. 6568	Contact Person:Charlotte Van Valkenburg				
	Past Operator's Name and Address:	Phone: 918-491-4314				
	Kaiser-Francis Oil Company P. O. Box 21468	Date12/3/99				
	Tulsa, OK 74121-1468 Title Technical Coordinator	Signature C' Tan Talker Ben				
	New Operator's License No. 4058	**************************************				
	New Operator's Name and Address American Warrior, Inc.	Phone 316-275-9231				
	P. O. Box 399	Oil/Gas Purchaser NCRA				
	Garden City, KS 67846	Date V 11-24-99				
	Title President	Signature Cecif O State				
	surface pond permit # has bee of the Kansas Corporation Commission. Th	request for transfer of injection authorization, n noted, approved and duly recorded in the records is acknowledgement of transfer pertains to Kansas ses not convey any ownership interest in the above				
		1				
	is acknowledged as the new operator and may continue to	is acknowledged as the new operator of the above named lease containing				
	inject fluids as authorized by Docket #	the surface pond permitted by #				
	Date	Date				
-	Authorized Signature  P&R 2/22/200 PRO PRO 7 3-2-00	Authorized Signature Form T1 7/94				
C	an 2/22/2000 FNO	1011111/94				

KANSAS CORPORATION COMMISSION

REQUEST FOR CHANGE OF OPERATOR

## MUST BE FILED FOR ALL WELLS

*LEASE NAME	Handy	*LOCAT	ON: 29-34S-	-31W			,
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)
1	Spud 8/29/70 15-175-20125	1650	Circle · FNL _			011	Prod.
2	Spud 10/11/70	660 .	FNL _	660	FEL/	Oil	TA'd
3	Spud 10/15/70	1980	FSL/	660	FEL/	Inj	Prod
			FSL/FNL _		FEL/FWL		
			FSL/FNL _		FEL/FWL		
			FSL/FNL _		FEL/FWL	<i>y</i>	
			FSL/FNL _		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL _		FEL/FWL	-	
			FSL/FNL		FEL/FWL	0	
3			FSL/FNL _		FEL/FWL		
-1			FSL/FNL		FEL/FWL		<u> </u>
2			FSL/FNL		FEL/FWL	-	
4	-		FSL/FNL		FEL/FWL		
<del></del>			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