

RECEIVED

JUL 21 2010

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

KCC WICHITA

Form T-1

June 2000

Form must be Typed

Form must be Signed

All blanks must be Filled

## REQUEST FOR CHANGE OF OPERATOR

## TRANSFER OF INJECTION OR SURFACE POND PERMIT

DOR 103936

Check Applicable Boxes:

☒ Oil Lease: No. of Wells 1 \*\*☐ Gas Lease: No. of Wells \_\_\_\_\_ \*\*

\*\* Side Two Must Be Completed.

☐ Saltwater Disposal Well - Docket No. \_\_\_\_\_

Spot Location: \_\_\_\_\_ feet from N / S Line

\_\_\_\_\_ feet from E / W Line

☐ Enhanced Recovery Project Docket No. \_\_\_\_\_Entire Project: ☐ Yes ☐ No

Number of Injection Wells \_\_\_\_\_ \*\*

Field Name: GoesselEffective Date of Transfer: 2-1-2003Lease Name: Fast BSE SE SW Sec. 6 Twp. 21S R01 ☒ E ☐ W

Legal Description of Lease: \_\_\_\_\_

S/2 SW/4 of Sec. 6-21S-R1ECounty: MarionProduction Zone(s): Hunton

Injection Zone(s): \_\_\_\_\_

Surface Pond Permit # \_\_\_\_\_

(API # 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 DRPast Operator's License No. 317861Past Operator's Name & Address: OCFIW Oil Co., Inc.P O Box 1325, Hutchinson, KS 67504

Title: \_\_\_\_\_

Contact Person: Rob HowellPhone: 620-543-2827Date: 2-19-03Signature: Rob Howell, PresNew Operator's License No. 59201New Operator's Name & Address: Te Pe Oil & GasP O Box 522, Canton KS 67528

Title: \_\_\_\_\_

Contact Person: Terry P. BandyPhone: 620-628-4428

Date: \_\_\_\_\_

Signature: T. P. Bandy

**Acknowledgment of Transfer:** The above request for transfer of injection authorization, surface pond permit # \_\_\_\_\_ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to 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: \_\_\_\_\_

Date: \_\_\_\_\_

Authorized Signature

\_\_\_\_\_ is acknowledged as the  
new operator of the above named lease containing the surface pond

permitted by # \_\_\_\_\_

Date: \_\_\_\_\_

Authorized Signature

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

RECEIVED

AUG 20 2010

KCC WICHITA

020103\_Fast\_B.pdf

EP&amp;R 8-23-10 PROD 8/23/10 UIC AUG 23 2010

\* Lease Name: \_\_\_\_\_ \* Location: \_\_\_\_\_

*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.

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE  
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1  
July 2010  
Form Must Be Typed  
Form must be Signed  
All blanks must be Filled

*This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.*

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 5920  
Name: Te-Pe Oil & Gas  
Address 1: P.O. Box 522  
Address 2: \_\_\_\_\_  
City: Canton State: Ks Zip: 67428 + 0522  
Contact Person: Terry P Bandy  
Phone: ( 620 ) 628-4428 Fax: ( 620 ) 628- 4429  
Email Address: tpbandy@sbcglobal.net

Well Location:  
SE. SE. SW Sec. 6 Twp. 21 S. R. 01 ☒ East ☐ West  
County: Marion  
Lease Name: Fast B Well #: 1  
*If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:*

**Surface Owner Information:**

Name: Menno Fast & Naomi E Fast JTS  
Address 1: 433 S Hess Ave  
Address 2: \_\_\_\_\_  
City: Hesston State: Ks Zip: 67062 + 8107

*When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.*

*If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.*

**Select one of the following:**

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

*If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.*

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 8-23-10 Signature of Operator or Agent: [Signature] Title: Oper.