

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
**REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION OR SURFACE PIT PERMIT**

Form T-1
April 2004
Form must be Typed
Form must be Signed
All blanks must be Filled

Check Applicable Boxes:

- Oil Lease: No. of Oil Wells 2 **
- Gas Lease: No. of Gas Wells _____ **
- Gas Gathering System: _____
- Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from N / S Line
_____ feet from E / W Line
- Enhanced Recovery Project Permit No.: _____
- Entire Project: Yes No
- Number of Injection Wells _____ **

Field Name: HOLLOW NIKKEL

**** Side Two Must Be Completed.**

Effective Date of Transfer: 03/01/2010
 KS Dept of Revenue Lease No.: 106087
 Lease Name: SCHROEDER
SE/4 - SE/4 - _____ Sec. 32 Twp. 21S R. 3 E W
 Legal Description of Lease: SOUTHEAST QUARTER
SOUTHEAST QUARTER
 County: MCPHERSON
 Production Zone(s): HUNTON
 Injection Zone(s): _____

030110_Schroeder.pdf

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

_____ feet from N / S Line of Section
 _____ feet from E / W Line of Section

Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling *OR*

Past Operator's License No. 32731 ✓
 Past Operator's Name & Address: LEWIS OIL & GAS OF GALVA, INC
PO BOX 195 GALVA, KS 67443
 Title: OPERATOR

Contact Person: GREGORY LEWIS
 Phone: 620-654-8414
 Date: 4-9-10
 Signature: *[Signature]*

New Operator's License No. 32490 ✓
 New Operator's Name & Address: TERRY D SCHMIDT OIL
1325 OAKLANE, MCPHERSON, KS 67460
 Title: OPERATOR

Contact Person: TERRY D SCHMIDT
 Phone: 620-245-7383
 Oil / Gas Purchaser: NCRA
 Date: 11-12-10
 Signature: *[Signature]* **KCC WICHITA**

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Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit 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 pit permit.

_____ is acknowledged as the
 new operator and may continue to inject fluids as authorized by
 Permit No.: _____ . Recommended action: _____
 Date: _____

_____ is acknowledged as the
 new operator of the above named lease containing the surface pit
 permitted by No.: _____ .
 Date: _____

Authorized Signature

DISTRICT _____	EPR <u>1-6-11</u>	PRODUCTION <u>1-7-11</u>	UIC <u>1-7-11</u>
Mail to: Past Operator _____	New Operator _____	District _____	

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

Must Be Filed For All Wells

KDOR Lease No.: 106087

* Lease Name: SCHROEDER

* Location: SE/4, SE/4, 32-21-3, MCPHERSON COUNTY

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)	
<u>2</u>	<u>15-113-00298-00-01</u> ✓	<u>1650</u> ^{Circle} FSL/FNL	<u>990</u> ^{Circle} FEL/FWL	<u>OIL</u>	<u>PROD</u>
<u>4</u>	<u>15-113-30029-00-00</u> ✓	<u>330</u> FSL/FNL	<u>990</u> FEL/FWL	<u>OIL</u>	<u>PROD</u>
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		

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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 # 32490
Name: TERRY D SCHMIDT OIL
Address 1: 1325 OAKLANE
Address 2: _____
City: MCPHERSON State: KS Zip: 67460 + _____
Contact Person: TERRY D. SCHMIDT
Phone: (620) 245-7383 Fax: (_____) _____
Email Address: _____

Well Location:
SE4 SE4 _____ Sec. 32 Twp. 21 S. R. 3 East West
County: MCPHERSON
Lease Name: SCHROEDER Well #: 2

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: HARLEY & KATIE MARSHALL
Address 1: 43 14TH AVENUE
Address 2: _____
City: MOUNDRIDGE State: KS Zip: 67107 + _____

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: 11-12-10 Signature of Operator or Agent: Terry D Schmidt Title: OPERATOR

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