

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form T-1  
March 2010  
Form must be Typed  
Form must be Signed  
All blanks must be Filled

REQUEST FOR CHANGE OF OPERATOR  
TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,  
MUST be submitted with this form.

Check Applicable Boxes:

- ☒ Oil Lease: No. of Oil Wells 12 11 \*\*  
☐ 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 5 \*\*

Field Name: Paola Rantoul

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

Effective Date of Transfer: 09/12/11

KS Dept of Revenue Lease No.: 138647 ✓

Lease Name: Crown Lease

NW - SW - SE - SW Sec. 17 Twp. 16 R. 21 ☒ E ☐ W

Legal Description of Lease: Tract A, Terrace Estates, a subdivision in the S.W. 1/4 of Section 17, Township 16,

Range 21, and Lot 15, Terrace Estates, a subdivision in the S.W. 1/4 of Section 17, Township 16, Range 21,

NW - SW 1/4, SW - SW 1/4, NE - SW 1/4 S17 T16S R21E.

County: Franklin

Production Zone(s): Squirrel

Injection Zone(s): Squirrel

Surface Pit Permit No.: No pits open

(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ Drilling DR

Past Operator's License No. 32218 /

Past Operator's Name & Address: TDR Construction, Inc.

PO Box 339 Louisburg, Ks 66053

Title: Owner

Contact Person: Lori Driskell

Phone: 913-837-8400

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

Signature: Lance Town

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New Operator's License No. 34585 /

New Operator's Name & Address: Oil Source Corp.

7105 W. 151th St

Overland Park 66212

Title: Owner

Contact Person: Lesli Stuteville

Phone: 913-980-8207

Oil / Gas Purchaser: Pacer Energy Marketing

Date: 8-30-11

Signature: [Signature]

**Acknowledgment of Transfer:** The above request for transfer of injection authorization, surface pit permit # No pits open 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: \_\_\_\_\_  
Authorized Signature

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\_\_\_\_\_ is acknowledged as  
the new operator of the above named lease containing the surface pit  
permitted by No.: \_\_\_\_\_  
Date: \_\_\_\_\_  
Authorized Signature

DISTRICT \_\_\_\_\_

EPR 9-27-11

PRODUCTION 9-30-11

UIC 9-28-11

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.: 138647 ✓

\* Lease Name: Crown Lease

\* Location: Sec. 17 Twp. 16 R. 21E

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	15-059-25214-0000/	600	Circle FSL/FNL	3581	Circle FEL/FWL	Oil	PROD
2	15-059-25560-00-00/	860	Circle FSL/FNL	3911	Circle FEL/FWL	Oil	PROD
3	15-059-25561-00-00/	200	Circle FSL/FNL	3911	Circle FEL/FWL	Oil	PROD
4	15-059-25220-0000/	200	Circle FSL/FNL	3581	Circle FEL/FWL	Oil	PROD
5	15-059-25221-0000/	1000	Circle FSL/FNL	3581	Circle FEL/FWL	Oil	PROD
6	15-059-25562-00-00/	1520	Circle FSL/FNL	3911	Circle FEL/FWL	Oil	PROD
7	15-059-25563-00-00/	2180	Circle FSL/FNL	3911	Circle FEL/FWL	Oil	PROD
8	15-059-25637-00-00/	1400	Circle FSL/FNL	3911	Circle FEL/FWL	Oil	PROD
9	15-059-25638-00-00/	1800	Circle FSL/FNL	3581	Circle FEL/FWL	Oil	PROD
*10	15-059-25564-00-00	2840	Circle FSL/FNL	3911	Circle FEL/FWL	Oil	PROD
14	15-059-25672-00-00/	1400	Circle FSL/FNL	4241	Circle FEL/FWL	Oil	PROD
15	15-059-25673-00-00/	1800	Circle FSL/FNL	4241	Circle FEL/FWL	Oil	PROD
RI-1	15-059-25217-0000	400	Circle FSL/FNL	3780	Circle FEL/FWL	INJ	Active
RI-2	15-059-25218-0000	800	Circle FSL/FNL	3780	Circle FEL/FWL	INJ	Active
RI-3	15-059-25664-00-00	1200	Circle FSL/FNL	3780	Circle FEL/FWL	INJ	Active
RI-4	15-059-25566-00-00	1600	Circle FSL/FNL	3780	Circle FEL/FWL	INJ	Active
RI-8	15-059-25668-00-00	1600	Circle FSL/FNL	4076	Circle FEL/FWL	INJ	Active
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			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

Filed by TDR

\* According to ACD, this well is in the NW 1/4 of Section 17-16-21E.

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.

This well is not within the legal description, will not be transferred

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 # 32218  
Name: TDR Construction, Inc.  
Address 1: P.O. Box 339  
Address 2:  
City: Louisburg State: KS Zip: 66053 +  
Contact Person: Lori Driskell  
Phone: ( 913 ) 837-7400 Fax: ( 913 ) 837-3397  
Email Address:

Well Location:  
NW SW SE SW Sec. 17 Twp. 16 S. R. 21 ☒ East ☐ West  
County: Franklin  
Lease Name: Crown Well #:

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

NW-SW/4, SW-SW/4 & NE/SW/4 SEC 17 T16S  
R21E

**Surface Owner Information:**

Name: Two Bros, LLC - Kevin Kleweno  
Address 1: 7105 W. 151th Street  
Address 2:  
City: Louisburg State: KS Zip: 66053 +

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*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: 9/19/2011 Signature of Operator or Agent: Lance T... Title: President