

SCANNED

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

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

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

Check Applicable Boxes:

- ☒ Oil Lease: No. of Oil Wells 1 **
☐ Gas Lease: No. of Gas Wells **
☐ Gas Gathering System:
☒ Saltwater Disposal Well - Permit No.: D1178 D-01.178
Spot Location: 3490 feet from ☐ N / ☒ S Line
2167 feet from ☒ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.:
Entire Project: ☐ Yes ☐ No
Number of Injection Wells **

Field Name: Gorham

Effective Date of Transfer: 11-30-2008

KS Dept of Revenue Lease No.: 105034 ✓

Lease Name: E Witt

NW SW NE Sec. 7 Twp. 14 R. 14 ☐ E ☒ W

Legal Description of Lease: 20 acres W/2 NE/4 7-14-14

County: Russell

Production Zone(s): 3188

Injection Zone(s): 578 Cheyenne Sandstone

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

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling

☐ Haul-Off ☐ Workover ☐ Drilling

Past Operator's License No. 7050 Exp. 6/30/05

Past Operator's Name & Address: Elmer L. Karst Oil
Box 208, Russell, KS 67665

Title: Elmer L. Karst, Ptr.

Contact Person: Viola R. Karst, Steve Karst,
Kirk A. Karst
Phone: 785-483-3362

Date: _____

Signature: Viola R. Karst, Ptr.

New Operator's License No. 33690 ✓

New Operator's Name & Address: Elmer L. Karst Oil
Box 208, Russell, KS 67665

Title: Viola R. Karst, Ptr.

Contact Person: Viola R. Karst, Steve Karst,
Kirk A. Karst
Phone: 785-483-3362

Oil / Gas Purchaser: MV
Date: 7-4-2011

Signature: Viola R. Karst, Ptr.

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.

Elmer L Karst Oil, A General Partnership is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: D-01.178 Recommended action: _____
Violation - Need UIC for 2005-2010
Date: 9-28-11 Charles B. Boyer
Authorized Signature

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

DISTRICT _____ EPR 9-28-11 PRODUCTION 9-30-11 UIC _____
Mail to: Past Operator 9-28-11 New Operator 9-28-11 District 4 9-28-11

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

110006 J MHI 11-1-11

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SEP 26 2011
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JUL 21 2011
KCC WICHITA

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Side Two

Must Be Filed For All Wells

KDOR Lease No.: 105034 ✓

* Lease Name: E Witt

* Location: 20 acres W/2 NE/4 7-14-14W

[illegible]

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 # #33690

Name: Elmer L. Karst Oil

Address 1: PO Box 208

Address 2: 18596 I 70 Road

City: Russell State: KS Zip: 67665-0208

Contact Person: Viola R. Karst, Kirk A. Karst, Steve W. Karst

Phone: (785-483-3362 or 785-483-8118)

Email Address: -----

Well Location: 20 acres in the
W/2 NE/4 Sec. 7 Twp. 14 S. R. 14 ☐ East ☒ West
County: Russell
Lease Name: E Witt Well #: 1

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

20 acres W/2 NE/4 7-14-14W

Surface Owner Information:

Name: Triple E Farming LLC

Address 1: 212 Earhart Circle

Address 2: -----

City: Lawrence State: KS Zip: 66049

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: Viola R. Karst Title: Ptr.

RECEIVED

SEP 26 2011

KCC WICHITA