061311 Meyers T.pd

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

Check Applicable Boxes: MUST be subn	e with the Kansas Surface Owner Notification Act, nitted with this form.
Oil Lease: No. of Oil Wells**	1
✓ Gas Lease: No. of Gas Wells6	Effective Date of Transfer: 06/13/2011
✓ Gas Gathering System: W2 NE 14 15 24	KS Dept of Revenue Lease No.: 222422
Saltwater Disposal Well - Permit No.:	Lease Name: MEYERS T
Spot Location: feet from N / S Line	W2 _ NE Sec. 14 Twp. 15 R. 24 V E W
feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	THE WEST 1/2 OF THE NORTHEAST 1/4 OF 14 15S 24E CONTAINING 80 ACRES
Entire Project: Yes No	County: JOHNSON
Number of Injection Wells **	
Field Name: STILWELL	Production Zone(s): CHEROKEE
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	
(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section
Type of Pit: Emergency Burn Settling	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling 0 P
Past Operator's License No. 32294 Exp. 3/30/11	Contact Person: Jeff Taylor
Past Operator's Name & Address: Osborn Energy, LLC	Phone: 913-533-9900
24850 Farley, Bucyrus KS 66013	Date: 06/13/2011 SEP 3 0 2011
Title: Director Of Operations	Date: 50 2011
Title:	Signature: 47 ask KCC WICHITA
New Operator's License No. 34570 ✓	Contact Person: Jeff Taylor
New Operator's Name & Address: Central States Energy	Phone: 913-238-3156 RECEIVED
24850 Farley, Bucyrus, KS 66013	
	Oil / Gas Purchaser: Riverdale JUN 1 6 2011 Date: 06/13/2011
Fitte: Director of Operations	14001111111
THE.	Signature: KCC WICHIA
Acknowledgment of Transfer: The above request for transfer of injection a	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 a	above injection well(s) or pit permit.
is acknowledged as	
	is acknowledged as
he new operator and may continue to inject fluids as authorized by	the new operator of the above named lease containing the surface pit
Permit No.: Recommended action:	permitted by No.:
Date:	Date
Authorized Signature	Date:
DISTRICT EPR P	
	District

Must Be Filed For All Wells

KDOR Lease No.: 222422

* Lease Name:	MEYERS T		* Location:	14 15 24E	
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fi	Section Line rom South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1-14	15-091-22767-000	4929 ESI/FNL	2304 Circle	GAS	SHUT IN
2-14	15-091-22774-0000	4000 ESD FNL	2283 EDFWL	GAS	SHUT IN
3-14	15-091-2277Ø-0000	4938 SUFNL	1655 €EDFWL	GAS	PROD
*414	15-091-22778-0000	2970 KSDFNL	2010 (FED FWL	GAS	SHUT IN
5-14	15-091-22831-0000	4032 ESD/FNL	1650 FEDFWL	GAS	SHUT IN
6-14	15-091-22841-0000				SHUT IN
*4-14	15-091-22780-000			Gas	shutin
			FEL/FWL		
		FSL/FNL	FEL/FWL		
4		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		-
		FSL/FNL	FEL/FWL		RECEIVED
		FSL/FNL	FEL/FWL		SEP 3 0 2011
		FSL/FNL	FEL/FWL		KCC WICHITA
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	7.00	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL .		RECEIVED
		FSL/FNL	FEL/FWL		JUN 1 6 2011
		FSL/FNL	FEL/FWL		KCC WICHITA

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

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

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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.

OPERATOR: License # 34570	Well Location:
Name: Central States Energy	- W2 - NE Sec. 14 Twp. 15 S. R. 24 ▼ East West
Address 1: 24850 Farley	County JOHNSON
Address 2:	County: JOHNSON Lease Name: MEYERS T Well #: 1 2 3 4 5 &6
City: Bucyrus State: KS Zip: 66013 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: Jeff Taylor	the lease below:
Phone: (913) 238-3156 Fax: (816) 618-3152	RECEIVED
Email Address:	SEP 3 0 2011
Surface Owner Information:	KCC WICHITA
Name: Thomas L & Kathleen M Meyers PO Box 624 Louisburg, KS 66053	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1:	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
Address 2:	county, and in the real estate property tax records of the county treasurer.
City:	
are preliminary non-binding estimates. The locations may be entered on	
	t (House Bill 2032), I have provided the following to the surface ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form cling filed is a Form C-1 or Form CB-1, the plat(s) required by this
Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be loc CP-1 that I am filing in connection with this form; 2) if the form be	t (House Bill 2032), I have provided the following to the surface ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form glied is a Form C-1 or Form CB-1, the plat(s) required by this demail address.
 ✓ I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be loce CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling for the second option, submit payment of the \$30.00 handling for the second option, submit payment of the \$30.00 handling for the second option, submit payment of the \$30.00 handling for the second option. 	t (House Bill 2032), I have provided the following to the surface rated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ring filed is a Form C-1 or Form CB-1, the plat(s) required by this demail address. Inowledge that, because I have not provided this information, the er(s). To mitigate the additional cost of the KCC performing this ree, payable to the KCC, which is enclosed with this form.
 ✓ I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be loce CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling for the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 	t (House Bill 2032), I have provided the following to the surface rated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ring filed is a Form C-1 or Form CB-1, the plat(s) required by this demail address. Incomplete that, because I have not provided this information, the er(s). To mitigate the additional cost of the KCC performing this ere, payable to the KCC, which is enclosed with this form. The with this form. If the fee is not received with this form, the KSONA-1 will be returned.
I certify that, pursuant to the Kansas Surface Owner Notice Ac owner(s) of the land upon which the subject well is or will be loc CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own	It (House Bill 2032), I have provided the following to the surface rated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this diemail address. Incomplete that, because I have not provided this information, the er(s). To mitigate the additional cost of the KCC performing this ere, payable to the KCC, which is enclosed with this form. The with this form. If the fee is not received with this form, the KSONA-1 will be returned.

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

KCC WICHITA