KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

100107 Unruh.pdf

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,

Check Applicable Boxes:	nitted with this form.			
Oil Lease: No. of Oil Wells 1	Effective Date of Transfer: October 1, 2007			
Gas Lease: No. of Gas Wells **	KS Dept of Revenue Lease No.: 104166			
Gas Gathering System:	Lease Name: Unruh SW - SW - SE - Sec. 26 Twp. 19 R. 2			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease: Southwest Quarter, Southwest Quarter			
Enhanced Recovery Project Permit No.:	Southeast Quarter			
Entire Project: Yes No	County: McPherson Production Zone(s): Mississippi			
Number of Injection Wells**				
Field Name:				
** Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.:	feet from N / S Line of Section			
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section FECEIVEL			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling OF			
20070 /	10 1 to 20			
Past Operator's License No. 30979 /	Contact Person: Russell Nightingale			
Past Operator's Name & Address: R J Operating	Phone: 620-245-8914 KCC WICHIT			
1380 24th Ave., Galva, KS 67443	Date: 084 6-2011			
Title: Operator	Signature: Kussell Mysthogale			
	RECEIVED			
New Operator's License No	Contact Person: Hal G. Krehbiel			
New Operator's Name & Address: Hal Krehbiel, d/b/a K-Bar Oil, LLC	Phone: 620-241-4670			
1219 Turkey Creek Dr	Oil / Gas Purchaser: NCRA KCC WICHITA			
McPherson, KS 67460	Date: 9-7- 2011			
Title: Operator	Signature: Hal S. Krehbres			
Title.	Signature			
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been			
	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	is acknowledged as			
the 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			
	PRODUCTION 10.27.11 uic 10-26-11			
Mail to: Past Operator New Operat	tor District			

KDOD I	No.: 104166	Must Be	Filed For All Wells		,,
* Lease Name:			* Location:	SW SW SE 26-19-2	McPherson County KS
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)
2	15-113-05610 🗸	357 <i>€</i> SDFNL	2404 Circle	Oil	Producing
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		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 0 8: 2011
		FSL/FNL	FEL/FWL		KCC WICHITA
		FSL/FNL	FEL/FWL		- PEACH IN-
		FSL/FNL	FEL/FWL		RECEIVED
		FSL/FNL	FEL/FWL		OCT 1 4 2011
					KCC WICHITA

A separate sheet may be attached if necessary

_____FSL/FNL _____FEL/FWL _

__ FEL/FWL _

____FSL/FNL __

^{*} 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

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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 # 32361	Well Location:	
OPERATOR: License # 32301 Name: Hal Krehbiel dba K-BarOil	SW_SW_SE _ Sec. 26 Twp, 19 S. R. 2 East X Wes	
Address 1: 1219 Turkey Creek Dr.	County: McPherson	
Address 2:	Lease Name: Unruh Well #: 1	
City: McPherson State: Ks Zip: 67460 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description	
Contact Person: Hal Krehbiel dba K-BarOil	the lease below:	
Contact Person: Hal Krehbiel dba K-BarOil Phone: (620) 241-4670 Fax: ()	SW 1/4 SW1/4 SE1/4	
Ernail Address:		
Surface Owner Information:		
Name: Radell Koehn	When filing a Form T-1 involving multiple surface owners, attach an addition	
Address 1: 1977 Moccasin Rd	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: Galva, State: Ks Zip: 67443 +		
Select one of the following:	ed on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted	
owner(s) of the land upon which the subject well is or will t	the Act (House Bill 2032), I have provided the following to the surface one located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this x, and email address.	
form; and 3) my operator name, address, phone number, fa:		
form; and 3) my operator name, address, phone number, far. I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the e owner(s). To mitigate the additional cost of the KCC performing this ling fee, payable to the KCC, which is enclosed with this form.	
form; and 3) my operator name, address, phone number, far. I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hand. If choosing the second option, submit payment of the \$30.00 hand.	I acknowledge that, because I have not provided this information, the e owner(s). To mitigate the additional cost of the KCC performing this ling fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-	
form; and 3) my operator name, address, phone number, factoring in the surface owner (s). I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hand of the second option, submit payment of the \$30.00 hand form and the associated Form C-1, Form CB-1, Form T-1, or Form CB hereby certify that the statements made herein are true and corrections.	I acknowledge that, because I have not provided this information, the e owner(s). To mitigate the additional cost of the KCC performing this ling fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-CP-1 will be returned. RECEIVED	
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