

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 13 11 oil 1 plugged  
☐ Gas Lease: No. of Gas Wells \_\_\_\_\_ \*\*  
☐ Gas Gathering System: \_\_\_\_\_  
☒ Saltwater Disposal Well - Permit No.: D-17272  
Spot Location: 3685 feet from ☐ N / ☒ S Line  
2510 feet from ☒ E / ☐ W Line  
☐ Enhanced Recovery Project Permit No.: \_\_\_\_\_  
Entire Project: ☐ Yes ☐ No  
Number of Injection Wells \_\_\_\_\_ \*\*

Field Name: Teter-Scott

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

Effective Date of Transfer: September 1, 2010 7/27/11

KS Dept of Revenue Lease No.: 102423

Lease Name: Teter

Sec. \_\_\_\_\_ Twp. 23S R. 9 ☒ E ☐ W

Legal Description of Lease: S/2 SW/4 SEC 10; W/2 NE/4, N/2 SE/4 & W/2 SEC 15; W/2 SE/4, S/2 NE/4 & NE NE SEC 16

County: Greenwood

Production Zone(s): Bartlesville / Viola

Injection Zone(s): Arbuckle

Surface Pit Permit No.: P09126  
(API No. if Drill Pit, WO or Haul)

4020 feet from ☐ N / ☒ S Line of Section  
3300 feet from ☒ E / ☐ W Line of Section

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

Past Operator's License No. 8902 Exp. 8/30/11  
Past Operator's Name & Address: Sam W. Mays, Jr.  
427 So. Boston Ave. Suite 505, Tulsa, OK 74103  
Title: Personal Representative of Sam Mays, Jr. Estate

Contact Person: Sam Mays III  
Phone: 918-382-9170  
Date: 8/31/2011  
Signature: [Signature]

New Operator's License No. 34503  
New Operator's Name & Address: Sam W. Mays, Jr. LLC.  
427 South Boston Ave. Suite 505  
Tulsa, OK 74103  
Title: Managing Member

Contact Person: Sam W. Mays III  
Phone: 918-382-9170  
Oil / Gas Purchaser: Pacer Energy Management  
Date: 8/31/2011  
Signature: [Signature]

**Acknowledgment of Transfer:** The above request for transfer of injection authorization, surface pit permit # P09126 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.

Sam W Mays Jr LLC is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: D-17272 Recommended action: Violations: NIT DUE  
Need 435 for 2010  
Date: 1-5-12 Cheryl L. Boyd  
Authorized Signature

Sam W Mays Jr. LLC is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.: P09126  
Date: 1/3/12 Olivia Raigosa  
Authorized Signature  
cc: Kathy

DISTRICT \_\_\_\_\_ EPR 1/3/12 PRODUCTION 1-12-12 UIC 1-5-12  
Mail to: Past Operator 1-5-12 New Operator 1-5-12 District (3) 1-5-12

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

SCANNED

Side Two

Must Be Filed For All Wells

KDOR Lease No.: 102423

\* Lease Name: Teter

\* Location:

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)
Sec 15 #1-SWD	15-073-19504-00-02 ✓ 1953	3685FSL <sup>Circle</sup> FSL/FNL	2510FEL <sup>Circle</sup> FEL/FWL	SWD	ACTIVE
Sec 15 37	15-073-19293 ✓	4950FSL <sup>Circle</sup> FSL/FNL	3630FEL <sup>Circle</sup> FEL/FWL	OIL	PROD
" 44	15-073-19294 ✓	4290FSL <sup>Circle</sup> FSL/FNL	2970FEL <sup>Circle</sup> FEL/FWL	OIL	PROD
		FSL/FNL	FEL/FWL		
" 15 1-B	15-073-20919 ✓	3955FSL FSL/FNL	1420FEL FEL/FWL	OIL	TA'D
Sec 15 3-B	15-073-20938A <sup>20-01</sup> ✓	3960FSL FSL/FNL	1980FEL FEL/FWL	OIL	TA'D
" " 4-B	15-073-21036 ✓	2560FSL FSL/FNL	1260FEL FEL/FWL	OIL	TA'D
" 15 5-B	15-073-21037 ✓	3300FSL FSL/FNL	1825FEL FEL/FWL	OIL	TA'D
" 15 6-B	15-073-21342 ✓	2775FSL FSL/FNL	1820FEL FEL/FWL	OIL	TA'D
		FSL/FNL	FEL/FWL		
Sec 15 8-B	15-073-21810	2970FSL FSL/FNL	3300FEL FEL/FWL	OIL	TA'D plugged 12/29/06
" " 9-B	15-073-22229 ✓	2310FSL FSL/FNL	2480FEL FEL/FWL	OIL	TA'D
" " 10-B	15-073-22230 ✓	2310FSL FSL/FNL	3140FEL FEL/FWL	OIL	TA'D
Sec 15 12-B	15-073-22232 ✓	4690FSL FSL/FNL	4550FEL FEL/FWL	OIL	TA'D
" " 16-B	15-073-22228 ✓	1980FSL FSL/FNL	4620FEL FEL/FWL	OIL	TA'D
		FSL/FNL	FEL/FWL		
NOTE:	Wells 1-B thru 16-B	FSL/FNL	FEL/FWL		
	have not been visually	FSL/FNL	FEL/FWL		
	verified for existence	FSL/FNL	FEL/FWL		
	Plugging records	FSL/FNL	FEL/FWL		
	are not complete	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

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 # 34503  
Name: Sam W. Mays, Jr. LLC.  
Address 1: 427 South Boston Ave. Suite 505  
Address 2: Suite 505  
City: Tulsa State: OK Zip: 74103 + \_\_\_\_\_  
Contact Person: Sam W. Mays III  
Phone: ( 918 ) 382-9170 Fax: ( \_\_\_\_\_ ) \_\_\_\_\_  
Email Address: maysoil.sam@gmail.com

Well Location:  
\_\_\_\_ - \_\_\_\_ - \_\_\_\_ Sec. \_\_\_\_ Twp. 23 S. R. 9 ☒ East ☐ West  
County: Greenwood  
Lease Name: Teter Well #: \_\_\_\_\_

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

**S/2 SW/4 SEC 10; W/2 NE/4, N/2 SE/4 & W/2  
SEC 15; W/2 SE/4, S/2 NE/4 & NE NE SEC 16**

**Surface Owner Information:**

Name: Linda Teter Hendrickson Trust  
Address 1: 326 Mission Rd.  
Address 2: \_\_\_\_\_  
City: Eureka State: KS Zip: 67045 + \_\_\_\_\_

*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: Aug. 31, 2011 Signature of Operator or Agent: [Signature] Title: Managing Member