

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 3 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☒ Saltwater Disposal Well - Permit No.: D-25292
- Spot Location: 4950 feet from ☐ N / ☒ S Line
- 1650 feet from ☒ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: BEMIS-SHUTTS

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

Effective Date of Transfer: DECEMBER 1, 2011

KS Dept of Revenue Lease No.: 108011

Lease Name: HENDERSON E LEASE

N/2 - NE/4 Sec. 22 Twp. 11S R. 18 ☐ E ☒ W

Legal Description of Lease: NORTH HALF OF NORTHEAST QUARTER
(N/2 OF NE/4)

County: ELLIS

Production Zone(s): KANSAS CITY, ARBUCKLE

Injection Zone(s): ARBUCKLE

Surface Pit Permit No.: P08136
(API No. if Drill Pit, WO or Haul)

Added per oper. (MD) 2/13/12

Type of Pit: ☒ Emergency ☐ Burn ☐ Settling

4950 feet from ☐ N / ☒ S Line of Section

2970 feet from ☒ E / ☐ W Line of Section

☐ Haul-Off ☐ Workover ☐ Drilling

Past Operator's License No. 33306

Past Operator's Name & Address: BLAKE EXPLORATION, LLC
PO BOX 150 BOGUE, KS 67625

Title: VICE PRESIDENT

Contact Person: MIKE DAVIGNON

Phone: 785-216-0062

Date: OCTOBER 21, 2011

Signature: [Signature] **KCC WICHITA**

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DEC 09 2011

New Operator's License No. 34616

New Operator's Name & Address: Karper Oil & Gas Corp.
P O Box 149
Graham, TX 76450

Title: Operations Manager

Contact Person: ROBERT L. McMILLAN

Phone: 940 549-0606

Oil / Gas Purchaser: COFFEYVILLE RESOURCES

Date: NOVEMBER 30, 2011

Signature: Robert L. McMillan

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.

Karper Oil & Gas Corporation is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: D-25292. Recommended action: Violation
Need U3C for 2008-2010

Date: 2-14-12 Cheryl R. Boyer
Authorized Signature

Karper Oil & Gas Corp. is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.: P08136

Date: 2/13/12 Olivia Raigosa
Authorized Signature

DISTRICT _____ EPR 2/13/12 PRODUCTION 02-14-12 UIC 2-14-12

Mail to: Past Operator 2-14-12 New Operator 2-14-12 District (4) 2-14-12

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

Must Be Filed For All Wells

✓

* Location: N/2 NE/4 22-11S-18W ELLIS COUNTY, KS

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* 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 # 33306
Name: BLAKE EXPLORATION, LLC
Address 1: PO BOX 150
Address 2: _____
City: BOGUE State: KS Zip: 67625 + _____
Contact Person: MIKE DAVIGNON
Phone: (785) 421-2594 Fax: (785) 421-2922
Email Address: rock@ruraltel.net

Well Location:
_____ Sec. 22 Twp. 11 S. R. 18 ☐ East ☒ West
County: ELLIS
Lease Name: HENDERSON E LEASE Well #: _____

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

N/2 OF NE/4 SECTION 22-11S-18W ELLIS
COUNTY, KS

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DEC 09 2011

Surface Owner Information:

Name: RON PEAVEY
Address 1: 207 SW 9th Street
Address 2: _____
City: PLAINVILLE State: KS Zip: 67663 + _____

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.

KCC WICHITA

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: 10/21/2011 Signature of Operator or Agent: Mike Davignon Title: V.P.