

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 2 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☐ Saltwater Disposal Well - Permit No.: _____
Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: _____

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

Effective Date of Transfer: 01-01-2012

KS Dept of Revenue Lease No.: 140345

Lease Name: ZAHORSKY A

_____ - E2 - SE Sec. 14 Twp. 20 R. 11 ☐ E ☒ W

Legal Description of Lease: E2 SE/4 14-20S-11W

County: BARTON

Production Zone(s): LKC AND ARBUCKLE

Injection Zone(s): _____

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

_____ feet from ☐ N / ☐ S Line of Section
_____ feet from ☐ E / ☐ W Line of Section

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

Past Operator's License No. 34039 ✓

Contact Person: TODD E MORGENTERN

Past Operator's Name & Address: BUFFALO CREEK EXPLORATION INC
PO BOX 251 ELLINWOOD, KS 67526

Phone: 620-564-3800

Title: OWNER/OPERATOR

Date: _____
Signature: Todd E. Morgentern

New Operator's License No. 34345 ✓

Contact Person: HAROLD (CHUCK) HAMBY

New Operator's Name & Address: HAMBY OIL LLC
300 N WILHELM ELLINWOOD, KS 67526

Phone: 620-786-4880

Oil / Gas Purchaser: NCRA

Date: 1-8-2012

Title: _____

Signature: Harold - Chuck Hamby

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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ . Recommended action: _____

Date: _____

Authorized Signature

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

Date: _____

Authorized Signature

RECEIVED

MAR 05 2012

KCC WICHITA

DISTRICT _____ EPR 3/13/12 PRODUCTION 3.15.12 UIC 3-14-12
Mail to: Past Operator _____ New Operator _____ District _____

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

010112_Zahorsky.pdf

Figure 1. The effect of the concentration of the *Agrobacterium* suspension on the transformation efficiency of *Agrobacterium* strains.

42

42

• Location: E2 SE/4 Se.14-20s-11w

[illegible]

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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

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.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 34039
Name: Buffalo Creek Exploration, Inc.
Address 1: P.O. Box 251
Address 2: _____
City: Ellinwood State: KS Zip: 67526 + _____
Contact Person: Chris Batchman
Phone: (620) 566-7111 Fax: (_____) _____
Email Address: _____

Well Location:
_____ E2 SE/4 Sec. 14 Twp. 20 S. R. 11 ☐ East ☒ West
County: Barton
Lease Name: Zahorsky A Well #: 1

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

Surface Owner Information:

Name: Marvin Sessler
Address 1: 567 SE 120 Ave
Address 2: _____
City: Ellinwood State: KS Zip: 67526 + _____

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: 3/9/2012 Signature of Operator or Agent:  Title: Owner

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MAR 12 2012

KCC WICHITA

Jerry Knobel

From: Olivia Raigosa
Sent: Wednesday, March 07, 2012 9:08 AM
To: Chris Batchman
Cc: Jerry Knobel
Attachments: 030712_Zahorsky A_Buffalo.pdf; 030712_Zahorsky A_Casino.pdf

Mr. Batchman,

On this first transfer from Buffalo Creek I will need the KSONA-1 , I was thinking of using the a copy of the one attached to the Casino one but I will you're your original signature on the KSONA-1.

On the one from Casino I will need original signatures from the past and new operator and since you are listed as an authorized signer and officer of the companies your signature for both companies is acceptable, you can copy this second transfer and just sign under the copy signatures and I will accept that, or I can send you the one I have here and you can sign this copy for the past and new operator and mail it back to me as soon as you can, I will not process the transfers until I receive the requested information.

Jerry Knobel has been trying to process the application but is not able to do so until my part is accomplished.

Thank you for your cooperation regarding this matter.

Olivia Raigosa
Research Analyst



Department of Environmental Protection and Remediation
Kansas Corporation Commission - Conservation Division
130 S. Market-Room 2078 | Wichita, Kansas | 67202
Phone (316) 337-6203 | Fax (316) 6211 | <http://kcc.ks.gov/>

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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Copy

Form T-1
March 2010
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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 2 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
- _____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Chase-Silica

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

Effective Date of Transfer: 01-01-2012

KS Dept of Revenue Lease No.: 140345

Lease Name: Zahorsky A

_____ E2 _____ SE Sec. 14 Twp. 20 R. 11 ☐ E ☒ W

Legal Description of Lease: E2 SE/4 14-20s-11w

County: Barton

Production Zone(s): LKC and Arbuckle

Injection Zone(s): _____

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

_____ feet from ☐ N / ☐ S Line of Section

_____ feet from ☐ E / ☐ W Line of Section

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

Past Operator's License No. 34039

Contact Person: Chris Batchman

Past Operator's Name & Address: Buffalo Creek Exploration, Inc.

Phone: 620-564-3800

PO Box 251, Ellinwood, KS 67526

Date: _____

Title: Owner/Operator

Signature: Chris Batchman

New Operator's License No. 34345

Contact Person: Harold (Chuck) Hamby

New Operator's Name & Address: Hamby Oil LLC

Phone: 620-786-4880

300 N. Wilhelm Ave., Ellinwood, KS 67526

Oil / Gas Purchaser: NCRA

Date: 1-8-2012

Title: Owner/Operator

Signature: Chuck Hamby

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KCC WICHITA

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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____. Recommended action: _____

Date: _____
Authorized Signature

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

Date: _____
Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

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

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

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

All blanks must be filled

Check Applicable Boxes:

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

Field Name: Chase Silica**** Side Two Must Be Completed.**Effective Date of Transfer: 12/31/2011KS Dept of Revenue Lease No.: 104616Lease Name: Zahorsky "A" # 1_____ 1/4 - 1/4 - 1/4 Sec. 14 Twp. 20S R. 11 ☐ E ☒ WLegal Description of Lease: NE SE SE 814-T20S-R11W BT CO KSCounty: BartonProduction Zone(s): Lansing- KC

Injection Zone(s): _____

Surface Pit Permit No.: N/A
(API No. if Drill Pit, WO or Haul)990 feet from ☐ N / ☒ S Line of Section330 feet from ☒ E / ☐ W Line of SectionType of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ DrillingPast Operator's License No. 4184Past Operator's Name & Address: Casino Petroleum, LLCP.O. Box 415 Ellinwood, KS 67528Title: MemberContact Person: Chris BatchmanPhone: 620-586-7111Date: 12/31/2011Signature: 

New Operator's License No. _____

New Operator's Name & Address: Buffalo Creek Exploration, Inc.

Title: _____

Contact Person: _____

Phone: _____

Oil / Gas Purchaser: _____

Date: _____

Signature: _____

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # N/A 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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ Recommended action: _____

Date: _____
Authorized Signature

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

Date: _____
Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

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

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* Location: NE SE SE S14-T20S-R11W, BT CO KS

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FEB 08 2012

KCC WICHITA

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

Field Name: Chase Silica

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

Effective Date of Transfer: 1/20/2012

KS Dept of Revenue Lease No.: 104516

Lease Name: Zahorsky "A" #1

_____ NE _____ SE _____ SE Sec. 14 Twp. 20S R. 11 ☐ E ☒ W

Legal Description of Lease: NE SE SE S14-T20S-R11W BT CO KS

County: Barton

Production Zone(s): Lansing-KC

Injection Zone(s): _____

Surface Pit Permit No.: N/A
(API No. If Drill Pit, WO or Haul)

990 feet from ☐ N / ☒ S Line of Section

330 feet from ☒ E / ☐ W Line of Section

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

Past Operator's License No. 4184

Past Operator's Name & Address: Casino Petroleum, LLC

P.O. Box 415, Ellinwood, KS 67526

Title: Managing Member

Contact Person: Chris Batchman

Phone: 620-564-7111

Date: 1/20/2012

Signature: Chris Batchman

New Operator's License No. 34345

New Operator's Name & Address: Hamby Oil LLC

300 North Wilhelm, Ellinwood, KS 67526

Title: Member

Contact Person: Harold Chuck Hamby

Phone: 620-766-4880

Oil / Gas Purchaser: _____

Date: 1-20-12

Signature: Chris Batchman Chas Hamby

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # N/A 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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ . Recommended action: _____
Date: _____

Authorized Signature

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

Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

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

FEB 08 2012

KCC WICHITA

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

012012
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Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: Chase Silica

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

Effective Date of Transfer: 1/20/2012

KS Dept of Revenue Lease No.: 104516

Lease Name: Zahorsky "A" #1

NE SE Sec. 14 Twp. 20S R. 11 ☐ E ☒ W

Legal Description of Lease: NE SE SE S14-T20S-R11W BT CO KS

County: Barton

Production Zone(s): Lansing-KC

Injection Zone(s): _____

Surface Pit Permit No.: N/A
(API No. if Drill Pit, WO or Haul)

990 feet from ☐ N / ☒ S Line of Section
330 feet from ☒ E / ☐ W Line of Section

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

Past Operator's License No. 4184
Past Operator's Name & Address: Casino Petroleum, LLC
P.O. Box 415, Ellinwood, KS 67526
Title: Managing Member

Contact Person: Chris Batchman
Phone: 620-564-7111
Date: 1/20/2012
Signature: Chris Batchman

New Operator's License No. 34345
New Operator's Name & Address: Hamby Oil LLC
300 North Wilhelm, Ellinwood, KS 67526
Title: Member

Contact Person: Harold Chuck Hamby
Phone: 620-786-4880
Oil / Gas Purchaser: _____
Date: 1-20-12
Signature: Chris Batchman Harold Hamby

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # N/A 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.

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KCC WICHITA

012012_Zahorsky_A_1.pdf

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
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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 # 4184
Name: Casino Petroleum LLC
Address 1: P.O. Box 415
Address 2: _____
City: Ellinwood State: KS Zip: 67526 + _____
Contact Person: Chris Batchman
Phone: (620) 566-7111 Fax: (_____) _____
Email Address: santafetrucking@hbcomm.net

Well Location:
NE SE SE Sec. 14 Twp. 20S S. R. 11 ☐ East ☒ West
County: Barton
Lease Name: Zahorsky "A" # 1 Well #: 1
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: Marvin Sessler
Address 1: 567 SE 120 Ave
Address 2: _____
City: Ellinwood State: KS Zip: 67526 + _____

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: 1-20-12 Signature of Operator or Agent: Chris Batchman Title: member

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FEB 08 2012

KCC WICHITA