Kansas Corpor/	ATION COMMISSION		
OIL & GAS CONSERVATION DIVISION Form must be Typed			
· · · · · · · · · · · · · · · · · · ·	NGE OF OPERATOR Form must be Signed All blanks must be Filled		
TRANSFER OF INJECTION			
heck Applicable Boxes: MUST be submit	Not the Kansaa Surface Owner Notification Act, Not with this form.		
Oil Lease: No. of Oil Wells*	Effective Date of Transfer: 1/23/2012		
Gas Lease: No. of Gas Wells **	KS Dept of Revenue Lease No.: 115072		
Gas Gathering System:	Lease Name: Williamson		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	Legal Description of Lease: SI2 -TI8 - R.2.IE		
Enhanced Recovery Fraged Frank Mac			
Entire Project: Ves No	County: Miami		
Number of Injection Wells	Production Zone(s): Darre		
old Name: TADIA, TOJOUL	Injection Zone(#): Defuirmed		
urface 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		
pe of Pit: Emergency Burn Settling	Haul-Off Workover Drilling OL		
st Operator's License Mo. 00001-5955	Contact Person: Charles Gorges		
st Operator's Name & Address: Pioneer Oil Co.	Phone: 913-285-0834		
3235 W. 251 St. Paola, KS 66071	Date:		
tle: President	Signature: Parles Harges		
w Operator's License No. 33973	Contact Person: Tim Guinotte		
ew Operator's Name & Address: Guinotte Company, LLC	785-229-2853		
526 S. Willow, Ottawa, KS 66067	Oil/Gas Purchaser: High Sierra RECEIVED		
	Date: 3-1-12 MAR 0 5 2012		
le: President	T. Itt		
	Signature: 16 p N/L KCC WICHIT/		
cknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # has been		
-	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
ommission records only and does not convey any ownership interest in the a	bove injection well(s) or pit permit.		
is acknowledged as	is acknowledged as		
e new operator and may continue to inject fluids as authorized by	the new operator of the above named lease containing the surface pit		
ermit No.: Recommended action:	permitted by No.:		
nte:	Date:		
	PRODUCTION 3. 19. 12. UIC 3-19- CRECEIVEL		
NOTOLOT			
DISTRICT EPR 3-16-12 F Mail to: Past Operator New Operato			

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KDOR Leese No.: 115072							
* Lease Name:	Williamson SW S12-TT8-21E						
Well No.	API No. (YR DRLD/PRE '67)	Footage from t (i.e. FSL = Feet fro	Section Line OK	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)		
1		4862 FSL FNL	129 Circle FEL/W	Oil	PROD		
2	15-121-22612	5197 FSLERN	167_FEL	Oil	PROD		
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL	<u></u>			
		FSL/FNL	FEL/FWL				
	н	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
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		FSL/FNL	Fel/Fwl				
	· · · · · · · · · · · · · · · · · · ·	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
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		FSL/FNL	FEL/FWL				
	. <u></u>	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		RECEIVED		
		FSL/FNL	FEL/FWL		MAR 0 5 2012		
		FSL/FNL	FEL/FWL				
		FSL/FNL			KCC WICHITA		
		FSL/FNL	FEL/FWL		MAR 1 4 2012		

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Side Two

A separate sheet may be attached if necessary

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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 KGGCANCHITA 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 339-73 Name: Civinotte Co. ULC Address 1: 1552. Lo. Willow Address 2: City: Ottowa State: KS Zip: Lole a. 7 Contact Person: Tim Givinotte Phone: (785) 229 -2453auc () Emeil Address:	Well Location: SWsec. 12 Twp. 18 s. R. 21 [] East [] West County: Lease Name: Will WarrSon If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: S12 -T18 -R21E
Surface Symer Information: Name: Boy & Sandrah Beets Address 1: 1000 Accusta Lh. Address 2: City: OHOWA state: KS zip: 160107.	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.

	VENCEIVED
I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.	MAR 1 4 2012
Date: 31112 Signature of Operator or Agent: 100000 Jozges Title: 4	ator KCC WICHITA
	RECEIVED
Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202	MAR 0 5 2012
	KCC WICHITA