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

060112 Ukens Lease.p

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,
MIIST he submitted with this form.

Check Applicable Boxes: MUST be submit	ted with this form.
✓ Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 6/1/2012
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 141897
Gas Gathering System:	Lease Name: Ukens Lease
Saltwater Disposal Well - Permit No.:	
Spot Location:feet from N / S Line	
feet from E / W Line	Legal Description of Lease: 990 North, 3557 West, from SE corner
Enhanced Recovery Project Permit No.:	
Entire Project: V Yes No	County: McPherson
Number of Injection Wells **	Production Zone(s): Mississippian
Field Name: Welch-Bornholdt	Injection Zone(s):
** Skie Two Must Be Completed.	nijecuon zone(s).
Surface Pit Permit No.: 15-113-21348	990 feet from ✓ N / S Line of Section
(API No. if Drill Pit, WO or Haul)	3557
Closed 10/17/11	Haul-Off Workover ✓ Drilling D
Type of Pit: Emergency Burn Settling	Haul-Off Workover ✓ Drilling UF
Past Operator's License No. 3293 /	Contact Person: Leroy Holt
Past Operator's Name & Address: Russell Oil, Inc.	Phone: 405-752-7600
PO Box 8050 Edmond, OK 73083	Date: 6/14/2012
	Signature: Chean L. Cheung
Title: President	Signature: Chamber Galley
New Operator's License No. 4184 √	Contact Person: Chris Batchman
New Operator's Name & Address: Casino Petroleum, LLC	Phone: 620-564-2517
PO Box 415	
Ellinwood, KS 67526	
Elliwood, NS 07320	Date: KCC WICHITA
Title:	Signature: (NWW) L) Heller
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # 15-113-21348 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	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:	•
. neconilienced action.	permitted by No.:RECEIVED ·
Date:	Date: JUL 0 5 2012
Date:	Authorized Signature
DISTRICT EPR EPR	PRODUCTION 7.180 WCHITA UIC 79-12
Mail to: Past Operator New Operato	District RECEIVED

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

JUN 1 8 2012

Side Two

KDOR Lease	No.: 141897	Must Be	rilea For All Wells		
	Ukens Lease		* Location:T	20S R5W Sec. 18 NW	SE SW
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-113-21348	990 Circle FSD FNL	1650 Circle	Oil	Inactive
		FSL/FNL	FEL/FWL		
·····		FSL/FNL	FEL/FWL		_
		FSL/FNL	FEL/FWL		
	<u> </u>	FSL/FNL	FEL/FWL		
WALLES AND		FSL/FNL	FEL/FWL		
	4-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0	FSL/FNL	FEL/FWL	alloce-to-VIMIII della d	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	AANU-MILA OO AANU-WARIAN WARIAN WARIAN AANU-MILA AANU-MILA AANU-MILA AANU-MILA AANU-MILA AANU-MILA AANU-MILA A	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL			
			FEL/FWL		
		FSL/FNL	FEL/FWL		
	, is the second of the contract of the second of the secon	FSL/FNL	FEL/FWL	-	RECEIVED
					JUN 2 7 2012
		FSL/FNL	FEL/FWL		KCC WICHITA
·					
		FSL/FNL	FEL/FWL	RECEIVE	 3D

A separate sheet may be attached if necessary

RECEIVED

JUL 0 5 2012

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 JUN 1 8 2012 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.

	Well Location:		
OPERATOR: License # 3293 Name: Russell Oil Inc.			
Address 1: Po Box 8050	County: Mc Pherson		
Address 2:	Lease Name: Ukens Well #: 1-18		
City: Edmond State: OK Zip: 73083	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: LeRey Helt =	the lease below:		
Contact Person: <u>LeRoy Holf #</u> Phone: (405) 752 - 7600 Fax: (405) 752-7607			
Email Address:			
Surface Owner Information:			
Name: Kaken & Duene Ukens	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		
Address 1: 106 W. Olive	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: Windom State: KS Zip: 67491 +			
	on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
Select one of the following:			
Select one of the following:	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this		
Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax,	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this		
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KCC WICHITA