KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

JUL 3 0 2012

District 4

Form must be Typed Form must be Signed

REQUEST FOR CHANGE OF OPERATORCC WICH TAplanks must be Filled 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 ____1 Effective Date of Transfer: # per oper. 7/31/12
KS Dept of Revenue Lease No.: 113363 Gas Lease: No. of Gas Wells _ Gas Gathering System: Lease Name: Pioneer Saltwater Disposal Well - Permit No.: _ Sec. 13 Twp. 11S R. 32 E W _ feet from N / S Line feet from E / W Line Enhanced Recovery Project Permit No.: E-22, 289 County: Logan Entire Project: Ves No Number of Injection Wells _ Production Zone(s): Lansing-Kansas City Lansing-Kansas City Injection Zone(s): ** Side Two Must Be Completed. N / S Line of Section Surface Pit Permit No.: feet from (API No. if Drill Pit, WO or Haul) W Line of Section feet from Haul-Off Type of Pit: Emergency Burn Settling Workover 33506 √ Past Operator's License No. Jim Keller Contact Person: Past Operator's Name & Address: Pioneer, Inc. Phone: 785-672-2338 1021 County Road CC Oakley, KS 67748 Title: President Signature: New Operator's License No. <u>34742</u>√ Contact Person: Scott Foote New Operator's Name & Address: Pioneer Feedyard, LLC Phone: 785-675-9009 1021 County Road CC Oakley, KS 67748 Oil / Gas Purchaser: Enterprise Crude Oil Title: Managing Member Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 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. Feedward, LIC 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.: 5-22.289 Recommended action: \labelatim permitted by No.: _ Authorized Signature Authorized Signature PRODUCTION

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

New Operator

Mail to: Past Operator

NONCOMPLIANCE WITH KANSAS SURFACE OWNERS NOTICE ACT

The enclosed form is being returned to you due to noncompliance with the Kansas Surface Owner Notification Act. The form cannot be processed due to the following problem(s):
A Form KSONA-1 was not submitted with the enclosed form.
☐ Required information was not entered on the Form KSONA-1.
☐ If filing a Form C-1, the plat showing the preliminary, nonbinding estimates of locations of tank batteries, lease roads, pipelines, and electrical lines was not submitted.
☐ The Form KSONA-1 did not indicate whether you have sent the surface owner the required information.
You must resubmit the form, along with a completed Form KSONA-1 and plat map if applicable, in full compliance with the checked items above. Again, your form has not been approved at this time. Please contact Olivia Raigosa at 316-337-6203 with any questions regarding these requirements.

RECEIVED

JUL 3 0 2012

KCC WICHITA

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:	(Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)	
OPERATOR: License # 34742		
OPERATOR: License # 34/42 Name: Pioneer Feedyard, LLC Address 1: 1021 County Road CC	Well Location:	
Name: 1021 County Road CC		
	County: Logan Lease Name: Pioneer Well #: 3, 5	
Address 2: City: Oakley State: KS Zip: 67748 +	Lease Name: Well #: 5, 5	
Scott Foote	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:	
Contact Person: Scott Foote Phone: (785) 675-9009 Fax: (785) 672-4914	NI/O	
	N/2	
Email Address:		
Surface Owner Information: Name: Pioneer Feedyard, LLC Address 1: 1021 County Road CC	When filing a Form T-1 involving multiple surface owners, attach an additional	
Address 1: 1021 County Road CC	sheet listing all of the information to the left for each surface owner. Surface	
Address 2:	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.	
Address 2:		
the KCC with a plat showing the predicted locations of lease roads, tan are preliminary non-binding estimates. The locations may be entered of Select one of the following:	k batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.	
owner(s) of the land upon which the subject well is or will be I	Act (House Bill 2032), I have provided the following to the surface ocated: 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.	
I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface ov task, I acknowledge that I am being charged a \$30.00 handling	acknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this gree, payable to the KCC, which is enclosed with this form.	
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.	
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.	
I hereby certify that the statements made herein are true and correct to Date: 7/26/2012 Signature of Operator or Agent:	Title: Office Manager	
	RECEIVED	

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

JUL 3 0 2012 KCC WICHITA