

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 7 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☐ Saltwater Disposal Well - Permit No.: E-209215 E-29033
Spot Location: 4840 feet from ☐ N / ☒ S Line
3190 feet from ☒ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: E-29,033
Entire Project: ☐ Yes ☐ No
Number of Injection Wells 1 **

Field Name: Neosho Falss-Leroy

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

Effective Date of Transfer: 7/30/2012

KS Dept of Revenue Lease No.: 127277

Lease Name: Kramer

____ - ____ - ____ NW/4 Sec. 8 Twp. 24 R. 17 ☒ E ☐ W

Legal Description of Lease: NW/4 of 8-24-17 E

County: Woodson

Production Zone(s): Mississippi

Injection Zone(s): Mississippi

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

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

Past Operator's License No. 30345

Past Operator's Name & Address: Piqua Petro Inc
1331 Xylan Rd, Piqua, KS 66761

Title: President

Contact Person: Greg Lair

Phone: 620-433-0099

Date: 7/30/12

*Signature: See below

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New Operator's License No. 30102

New Operator's Name & Address: C & S Oil
2272 170th Rd

Neosho Falls, KS, 66758

Title: _____

Contact Person: Trent Christenson

Phone: 620-380-1810

Oil / Gas Purchaser: Pacer Energy Marketing, LLC

Date: 7/30/2012

Signature: Trent Christenson

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KCC Chanute Dist. #3

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.

Christenson, Robert dba C+S Oil is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: E-29,033. Recommended action: Need
U3C's for last 5 yrs 2006-2011
Date: 8-6-12 Christenson
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 8/3/12 PRODUCTION 8-10-12 UIC 8-6-12
Mail to: Past Operator 8-6-12 New Operator 8-6-12 District (3) 8-6-12

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

073012_Kramer_B.pdf

* Location: NW/4 8-24-17 

KCC WICHITA

* 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 # 30345
Name: Piqua PetroInc
Address 1: 1331 Xylan Rd
Address 2: _____
City: Piqua State: KS Zip: 66761 + _____
Contact Person: Greg Lair
Phone: (620) 433-0099 Fax: (_____) _____
Email Address: _____

Well Location:
_____ NW/4 Sec. 8 Twp. 24 S. R. 17 ☒ East ☐ West
County: Woodson

Lease Name: Kramer Well #: _____

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

NW/4 8-24-17

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Surface Owner Information:

Name: Steve Kramer
Address 1: 1310 600TH ST
Address 2: _____
City: Iola State: KS Zip: 66749 + _____

KCC Chanute Dist #3

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: 7/30/2012 Signature of Operator or Agent: [Signature] Title: President

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KCC WICHITA