# 090112 Wickolls B.pdf

## 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:	0 1 10
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 9-1-12
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 211376
Gas Gathering System:	Lease Name: Nuckolls B
Saltwater Disposal Well - Permit No.:	N/2 _ SE Sec. 15 Twp. 21 R. 20 E V W
Spot Location: feet from N / S Line	Legal Description of Lease:
feet from E / W Line	
Enhanced Recovery Project Permit No.:	RECEIVED
Entire Project: Yes No	County: Pawnee SEP 0 6 2012
Number of Injection Wells**	Production Zone(s): Krider
Field Name: Steffen South	Injection Zone(s): KCC WICHITA
** Side Two Must Be Completed.	
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover OC Drilling
Past Operator's License No. 32302 Exp. //3407	Contact Person: Mike McNaul
Past Operator's Name & Address: Key Gas Corporation	Phone:
155 N. Market, Ste 900, Wichita, KS 67202	9 1 12
AND PROPERTY OF A SHARE AND A STATE OF THE STATE OF A SHARE AND A	Date:
Title:	Signature:
New Operator's License No. 4419	Contact Person: R. A. (Dick) Schremmer
New Operator's Name & Address: Bear Petroleum LLC	Phone: 316-524-1225
P.O. Box 438	Oil / Gas Purchaser:
	01.17
Haysville, KS 67060	Date:
Title: President	Signature:
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	
·	
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:	permitted by No.:
Date:	Date:
	PRODUCTION 9.12.12 UIC 4-12-12
Mail to: Past Operator New Operat	D: 11:4

### Side Two

### Must Be Filed For All Wells

		معي	Must Be i
KDOB Lease No.:	211376	<b>V</b>	

Lease Name:	Nuckolls B		* Location:		
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1-15	15-145-21040	1980 Circle	1320 FEYFWL	Gas	TA
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
Property and all a supplemental and a supplemental	NAMES OF THE PROPERTY OF THE P	FSL/FNL	FEL/FWL	Manager and Manage	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	-	
		FSL/FNL			
		FSL/FNL			
		FSL/FNL	FEL/FWL		TOTIVED
		FSL/FNL	FEL/FWL	100	OFL 0 9 5015
manna mandad waren		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

A separate sheet may be attached if necessary

<sup>\*</sup> 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.

	Well Location:	
OPERATOR: License # 4419  Bear Petroleum LLC	N/2 SE Sec 15 Two 21 S B 20 Fast X West	
Name: Bear Petroleum LLC Address 1: P.O. Box 438	County: Pawnee  Lease Name: Nuckolls B Well #: 1-15	
	Lease Name: Nuckolls B Well #. 1-15	
Address 2: KS 67060	Lease Name.	
City: Haysville State: KS Zip: 67060 + Contact Person: R. A. (Dick) Schremmer  Phone: (316) 524-1225 Fax: (316) 524-1027	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:	
Contact Person: 15. A. (Dick) Confermed 316 524-1225 316 524-1027		
Phone: ( ) SZ4-1225 Fax: ( OTO ) SZ4-1321		
Email Address: showland@bearpetroleum.com		
Surface Owner Information:		
	When filing a Form T-1 involving multiple surface owners, attach an addition	
Name:   Donald L. Nuckolls	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	
Address 2: P.O. Box 87	county, and in the real estate property tax records of the county treasurer.	
City: Burdett State: KS Zip: 67523		
Select one of the following:	on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.	
	and the second s	
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	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this	
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  I have not provided this information to the surface owner(s).  KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 handling 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 CB-1.	e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form in being filed is a Form C-1 or Form CB-1, the plat(s) required by this , and email address.  I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ng fee, payable to the KCC, which is enclosed with this form.  In the fee is not received with this form, the KSONA-1 in the section of the KSONA-1 will be returned.	
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

KCC WICHITA