

RECEIVED

AUG 29 2012

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

KCC WICHITA

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 PERMITForm 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 \_\_\_\_\_ \*\*
- ☒ Gas Lease: No. of Gas Wells 1 \*\*
- ☐ Gas Gathering System: \_\_\_\_\_
- ☒ Saltwater Disposal Well - Permit No.: D-28885
- Spot Location: 127 feet from ☐ N / ☒ S Line
- 5153 feet from ☒ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: \_\_\_\_\_
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells \_\_\_\_\_ \*\*

Field Name: Fraiser**\*\* Side Two Must Be Completed.**Effective Date of Transfer: 11-1-11KS Dept of Revenue Lease No.: 229570 *OR*Lease Name: PayneSec. 17 Twp. 33 R. 13 ☒ E ☐ WLegal Description of Lease: E/2 SE/4 7-33-13, W/2 SW/4 8-33-13.N/2 NE/4 18-33-13, N/2 NW/4 17-33-13County: ChautauquaProduction Zone(s): HushpuckneyInjection Zone(s): ArbuckleSurface Pit Permit No.: \_\_\_\_\_  
(API No. if Drill Pit, WO or Haul)Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover *OR* ☐ DrillingPast Operator's License No. 33712Past Operator's Name & Address: Clark Energy1198 Rd. 31 Havana, KS 67347Title: ManagerContact Person: Randy ClarkPhone: 620-330-2110Date: 11-22-11Signature: *Randy W. Clark*New Operator's License No. 4448New Operator's Name & Address: Perkins Oil Enterprises IncBox 707 Howard, KS 67349Title: PresidentContact Person: Jim PerkinsPhone: 620-330-7134Oil / Gas Purchaser: PostrockDate: 12-2-2011Signature: *Jim Perkins*

**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.

Perkins Oil Enterprises Inc is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: D-28885. Recommended action: Violations MET OVERDUE 10-2-10 + U3C's DUE 2007-2011

Date: 8-31-12 *Cheryl L. Boyer*  
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 <u>8/30/12</u>	PRODUCTION <u>9.5.12</u>	UIC <u>8-31-12</u>
Mail to: Past Operator <u>8-31-12</u>	New Operator <u>8-31-12</u>	District <u>3</u>	<u>8-31-12</u>

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

RECEIVED  
JUL 30 2012  
KCC WICHITA  
Name - IMJ.pdf

\* Lease Name: Payne \* Location: \_\_\_\_\_

*A separate sheet may be attached if necessary*

\* 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.

RECEIVED

AUG 29 2012

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

KCC WICHITA

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 # 33712  
Name: Clark Energy  
Address 1: 1198  
Address 2: \_\_\_\_\_  
City: Havana State: KS Zip: 67347 + \_\_\_\_\_  
Contact Person: Randy Clark  
Phone: ( 620 ) 330-2110 Fax: ( \_\_\_\_\_ ) \_\_\_\_\_  
Email Address: rw\_clark@yahoo.com

Well Location:

\_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_ ☐ East ☐ West

County: ChautauquaLease Name: Payne Well #: \_\_\_\_\_

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

E/2 SE/4 7-33-13 W/2 SW/4 8-33-13 N/2  
NW/4 17-33-13 N/2 NE/4 18-33-13

## Surface Owner Information:

Name: Dan Payne  
Address 1: 1405 Rd. 29  
Address 2: \_\_\_\_\_  
City: Elk City State: KS Zip: 67344 + \_\_\_\_\_

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: 11-22-11 Signature of Operator or Agent: Randy W. Clark Title: Manager

RECEIVED

JUL 30 2012

KCC WICHITA