## 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:	O I I S		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 9-1-12 by KS Dept of Revenue Lease No.: 118410 & 214465  Lease Name: Mary Kay Lipp		
Gas Lease: No. of Gas Wells			
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:	NE Sec. 24 Twp. 21 R. 20 EVW		
Spot Location: feet from N / S Line	Legal Description of Lease:		
feet from E / W Line	Legal Description of Lease.		
Enhanced Recovery Project Permit No.:	RECEIV		
Entire Project: Yes No	County: Fawrice		
Number of Injection Wells **	Production Zone(s):NOV 0.2		
Field Name: Steffen South	Injection Zone(s):		
** Side Two Must Be Completed.	Injection Zone(s): KCC WICH		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pit, WO or Haul)	feet from F / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover OF Drilling		
Past Operator's License No. 32302 Exp. 10/30/07	Contact Person: Mike McNaul		
Past Operator's Name & Address: Key Gas Corporation	Phone:		
155 N. Market, Ste 900, Wichita, KS 67202	Date: 9-[-12		
Title:	Signature:		
New Operator's License No. 4419 J	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:		
Haysville, KS 67060	Pate: 9-1-12.		
Title: President	Signature:		
	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.		
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:		
Authorized Signature	Authorized Signature		
7	PRODUCTION 11.9.12 UIC 11-8-12		
Mail to: Past Operator New Operat	torDistrict		

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

DIT Mary Kay Lipp. Po



#### Side Two

### Must Be Filed For All Wells

KDOR Lease No.: 118410 & 214465

* Lease Name:	Mary Kay Lipp		* 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)
1-24	15-145-20505	3960 Circle	1320 Circle	Gas	<u>TA</u>
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
-	was to the second of the secon	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	1 1	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		The second secon
		FSL/FNL	FEL/FWL		
	. ,	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		Name of the Control o
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
NAME OF THE PARTY		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
-	AAAAA	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		RECEIVED
		FSL/FNL	FEL/FWL		NOV 0 2 2012
		FSL/FNL	FEL/FWL		VOO
					- 111/

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.

Select the corresponding form being filed: C-1 (Intent) CB-1	(Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 4419	Well Location:		
OPERATOR: License # 4419  Name: Bear Petroleum LLC  Address 1: P.O. Box 438			
Address 1. P.O. Box 438	County: Pawnee  Lease Name: Mary Kay Lipp Well #: 1-24		
Address 0	Lease Name: Mary Kay Lipp Well #: 1-24		
Address 2:  City: Haysville  Contact Person: R. A. (Dick) Schremmer  Phone: (316) 524-1225  Email Address: showland@bearpetroleum.com	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: R. A. (Dick) Schremmer	the lease below:		
Phone: (316) 524-1225 Fax: (316) 524-1027			
Email Address: showland@bearpetroleum.com			
Surface Owner Information:  Name: Brian V. Hallman for Johnson AG Services  Address 1: P.O. Box 387  Address 2:	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.		
the KCC with a plat showing the predicted locations of lease roads, ta are preliminary non-binding estimates. The locations may be entered Select one of the following:	hodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat I on 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	Act (House Bill 2032), I have provided the following to the surface elocated: 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). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 handling	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.		
If choosing the second option, submit payment of the \$30.00 handlin form and the associated Form C-1, Form CB-1, Form T-1, or Form C	ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.		
I hereby certify that the statements made herein are true and correct			
Date: 9-1-12 Signature of Operator or Agent	Title: President		
Date: 1 1 1 2 2 Signature of Operator or Agents	RECEIV		

RECEIVED NOV 0 2 2012 KCC WICHITA