

MAR 07 2013

CONSERVATION DIVISION
WICHITA, KS

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 1 **
- Gas Lease: No. of Gas Wells _____ **
- Gas Gathering System: _____
- Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from N / S Line
_____ feet from E / W Line
- Enhanced Recovery Project Permit No.: _____
- Entire Project: Yes No
- Number of Injection Wells _____ **

Field Name: Knop

**Side Two Must Be Completed.

Effective Date of Transfer: 3/11/13

KS Dept of Revenue Lease No.: 103433

Lease Name: Schwertfeger

_____ Sec. 16 Twp. 19 R. 12 E W

Legal Description of Lease: Northwest Quarter (NW4) of Section 16, Township 19 South, Range 12 West, Barton County, Kansas

County: Barton

Production Zone(s): Arbuckle Group

Injection Zone(s): _____

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 Drilling

Past Operator's License No. 5984 Exp. 6/30/83

Past Operator's Name & Address: Four Way Operating, Inc.
P.O. Box 698, Great Bend, KS 67530-0698

Title: President

Contact Person: James W. Rockhold

Phone: (316) 792-4420

Date: 3/6/13

Signature: Nancy Staniel, CPA - PMA for James Rockhold

New Operator's License No. 34434

New Operator's Name & Address: Edison Operating Company, LLC
9427 E. Cross Creek, Wichita, KS 67206

Title: Manager

Contact Person: David G. Withrow

Phone: (316) 613-1544

Oil / Gas Purchaser: NCRA

Date: 3-7-13

Signature: D. G. Withrow

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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ . Recommended action: _____
Date: _____
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 3/11/13 PRODUCTION 3-13-13 UIC 3-12-13
Mail to: Past Operator _____ New Operator _____ District _____

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

031113_Schwertfeger.pdf

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) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # 34434
Name: Edison Operating Company, LLC
Address 1: 9427 E. Cross Creek
Address 2: _____
City: Wichita State: KS Zip: 67206 + _____
Contact Person: David G. Withrow, Manager
Phone: (316) 613-1544 Fax: (316) 201-1687
Email Address: EOC@EdisonOpCo.com

Well Location:
_____-_____-_____-NW Sec. 16 Twp. 19 S. R. 12 East West
County: Barton
Lease Name: SCHWERTFEGER Well #: 1
if filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
NW/4 16-19-12

RECEIVED
KANSAS CORPORATION COMMISSION

MAR 07 2013

Surface Owner Information:

Name: SCHWERTFEGER, FRANK & SCHWERTFEGER, MILTON RAY
Address 1: 410 BEVERLY DR
Address 2: _____
City: Ellinwood State: KS Zip: 67526 + _____

CONSERVATION DIVISION
WICHITA, KS

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: 3-7-13 Signature of Operator or Agent:  Title: Managing Partner