### 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: Effective Date of Transfer: October 1, 2012 Oil Lease: No. of Oil Wells Gas Lease: No. of Gas Wells \_ 1 KS Dept of Revenue Lease No.: 226137 Gas Gathering System:\_ Lease Name: BLAES J Saltwater Disposal Well - Permit No.: \_\_\_\_\_feet from N/ S Line \_\_ feet from \_\_ E / \_\_ W Line except S 91.17' and part of Lot 6 W Creek; Lots 10 and 16; Lots 11 and 15 W of Creek Enhanced Recovery Project Permit No.: \_\_ County: \_Montgomery Entire Project: Yes No Number of Injection Wells \_ Production Zone(s): MULTI-ZONE Field Name: \_ Injection Zone(s):\_\_ \*\* Side Two Must Be Completed. \_ feet from N / S Line of Section Surface Pit Permit No.: \_ (API No. if Drill Pit, WO or Haul) feet from E / W Line of Section Type of Pit: Emergency Burn Settling Haul-Off Workover Contact Person: \_\_\_Victor H. Dyal 33365-/ Past Operator's License No. Past Operator's Name & Address: Layne Energy Operating, LLC Phone: 913-362-0510 1900 Shawnee Mission Parkway, Mission Woods, KS 66205 December 1, 2012 Title: President Contact Person: John G. Burke New Operator's License No. . Phone: 214-691-5800 New Operator's Name & Address: LR Energy, Inc. 8150 N. Central Expressway, Suite 1605 Oil / Gas Purchaser: Enserco Energy Dallas, TX 75206 Title: Chief Operating Officer Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #\_ 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 \_\_\_\_\_\_ , Recommended action: permitted by No.: \_\_\_\_ Date: Authorized Signature Authorized Signature DISTRICT -Mail to: Past Operator \_ **New Operator** 

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease No.: 226137						
* Lease Name: BLAES J			* Location:1	* Location: 18-32-17E		
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)	
13-18	15-125-30609	960 Grele	687 Circle	СМ	PROD	
		FSL/FNL	FEL/FWL		_	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL		<u> </u>	
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		FSL/FNL	FEL/FWL			
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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)		
OPERATOR: License # 33365	Wall and a		
Lavne Energy Operating, LLC	Well Location:SW_SW_Sec. 18 Twp. 32 S. R. 17 ☒ East ☐ West		
Name: Layne Energy Operating, LLC Address 1: 1900 Shawnee Mission Parkway	County Montgomery		
	County: Montgomery  Lease Name: BLAES J Well #: 13-18		
Address 2: 66205	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Costant Barran. Victor H. Dyal			
City: Mission Woods State: KS Zip: 66205 + Contact Person: Victor H. Dyal  Phone: ( 913 ) 362-0510 Fax: ( 913 ) 362-0133			
Email Address:			
Email Address.			
Surface Owner information: Name: WILLIAM E BLAES AND JENNY LOU BLAES  458 S 5150 ST	When filling 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		
Address 1: 430 3 3 130 3 1	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.		
Name: WILLIAM E BLAES AND JENNY LOU BLAES           Address 1: 458 S 5150 ST           Address 2:			
the KCC with a plat showing the predicted locations of lease roads, tan	dic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat in 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 l	Act (House Bill 2032), I have provided the following to the surface ocated: 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.		
	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this gree, payable to the KCC, which is enclosed with this form.		
If choosing 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 CP	fee with this form. If the fee is not received with this form, the KSONA-1 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: 12/1/12 Signature of Operator or Agent:	Winner Title: President		
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