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,

Check Applicable Boxes:	lea wiin inis Iorin. I
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: October 1, 2012
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.:
Gas Gathering System:	Lease Name: METZGER
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease: T 30S, R 14E Sec 35:
Enhanced Recovery Project Permit No.:	The E/2 SE/4 NW/4; AND 3 metes/bounds tracts in the NW/4
Entire Project: Yes No	County: Wilson
Number of Injection Wells***	Production Zone(s): MULTI-ZONE
Field Name:	Injection Zone(s):
** 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 Of Drilling
Past Operator's License No33365✓	Contact Person: Victor H. Dyal
Past Operator's Name & Address: Layne Energy Operating, LLC	Phone: 913-362-0510
1900 Shawnee Mission Parkway, Mission Woods, KS 66205	December 1, 2012
	Date: Phil Winner
Title: President	Signature:
New Operator's License No.	Contact Person: John G. Burke
New Operator's Name & Address: LR Energy, Inc.	Phone: 214-691-5800 RECEIVED
8150 N. Central Expressway, Suite 1605	
Dallas, TX 75206	Date: December 1, 2012 Section KCC WICHIT
Title: Chief Operating Officer	Signature:
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been
	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:
Date:	Authorized Signature
DISTRICT EPR 3/8/13	PRODUCTION 3.12.13 UIC 3-11-13
Mail to: Past Operator New Operator	or District

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

100112 Metzger_34_30.pdf

Side Two

7

Must Be Filed For All Wells

KDOR Lease No.	227070		
KDOD Lasea Na ·	221010		

* Lease Name: METZGER		* Location: 35-30-14E				
Well No. API No. (YR DRLD/PRE '67)			Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)	
6-35	15-205-26372	2300 Circle	2300 Circle	СМ	PROD	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
-		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL		DEC 2 8 2012	
		FSL/FNL	FEL/FWL		KCC WICHITA	
		FSL/FNL	FEL/FWL			

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.

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.

Layne Energy Operating, LLC dress 1: 1900 Shawnee Mission Parkway Coderess 2: Legar Mission Woods State: KS Zip: 66205 + Mission Woods State: KS Zip: 66205 + Mission Mission Woods Mission Woods State: KS Zip: 66205 + Mission Mission Woods Mission Woods State: KS Zip: 66205 + Mission Woods Missio	/ell Location: SENWSec. 35Twp. 30S. R14X East West ounty: Wilson ease Name: METZGER		
1900 Shawnee Mission Parkway Code 1900 Shawnee Mission Parkway 1900 Shawnee	ounty: Wilson ease Name: METZGER Well #: 6-35 filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Aress 2:	ease Name: METZGER Well #: 6-35		
r: Mission Woods State: KS Zip: 66205 +	filing a Form T-1 for multiple wells on a lease, enter the legal description of		
ntact Person: Victor H. Dyal Pax: (913) 362-0133 all Address:	•		
ail Address:			
ail Address:			
doca Ouman Information			
desa Ouman Information.			
face Owner Information:			
ne: BOB METZGER W.	then filing a Form T-1 involving multiple surface owners, attach an additional		
dress 1: 2700 EINING EANE	neet listing all of the information to the left for each surface owner. Surface wner 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.		
r. INDEPENDENCE State: KS Zip: 67301 +			
KCC with a plat showing the predicted locations of lease roads, tank batte preliminary non-binding estimates. The locations may be entered on the P	ries, pipelines, and electrical lines. The locations shown on the plat Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
ect one of the following:			
I certify that, pursuant to the Kansas Surface Owner Notice Act (Ho owner(s) of the land upon which the subject well is or will be located CP-1 that I am filing in connection with this form; 2) if the form being form; and 3) my operator name, address, phone number, fax, and em	d: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form filed is a Form C-1 or Form CB-1, the plat(s) required by this		
I have not provided this information to the surface owner(s). I acknow KCC will be required to send this information to the surface owner(s) task, I acknowledge that I am being charged a \$30.00 handling fee, p	s). To mitigate the additional cost of the KCC performing this		
hoosing the second option, submit payment of the \$30.00 handling fee w n and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will l			
	est of my knowledge and belief.		
ereby certify that the statements made herein are true and correct to the b			

DEC 2 8 2012 KCC WICHITA