## 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:	•
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.: 230053
Gas Gathering System:	Lease Name: GAUT
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	Legal Description of Lease: T 31 South, R 15 East Sec 18:
feet from E / W Line	Lots Three (3) and Four (4) (aka W/2 SW/4)
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Montgomery
Number of Injection Wells**	Production Zone(s): MULTI-ZONE
Field Name:	
** Side Two Must Be Completed.	Injection Zone(s):
O. Co. Ph. Down H.M.	feet from N / S Line of Section
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	
Type of Pit: Emergency Burn Settling	
Past Operator's License No. 33365/	Contact Person: Victor H. Dyal : 다
Past Operator's Name & Address: Layne Energy Operating, LLC	Phone: 913-362-0510
1900 Shawnee Mission Parkway, Mission Woods, KS 66205	Date: December 1, 2012
Title: President	Signature:
New Operator's License No. 34779	Contact Person: John G. Burke RECEIVED
New Operator's Name & Address: _LR Energy, Inc.	Phone: 214-691-5800 <b>DEC 2 8 2</b> 012
8150 N. Central Expressway, Suite 1605	Oil / Gas Purchaser: Enserco Energy
Dallas, TX 75206	Date: December 1, 2012 KCC WICHITA
	Jethe _
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:
Authorized Signature /	
	111050011011
Mail to: Past Operator New Operat	tor District

#### Side Two

#### Must Be Filed For All Wells

Lease Name:	GAUT		*	Location: 1	8-31-15E	
Well No.	API No. (YR DRLD/PRE '67)	Footage from 3 (i.e. FSL = Feet fro	Section Li	ne Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
12-18	<u>15-125-31500√</u>		574	Circle FEL/FW	СМ	PROD
an disk		FSL/FNL		FEL/FWL		
		FSL/FNL		FEL/FWL		
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		FSL/FNL	-	FEL/FWL		DEC 2 8 201
		FSL/FNL		FEL/FWL		KCC WICHI
		FSL/FNL	***************************************	FEL/FWL		

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 K9ONA-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.

Name: Layne Energy Operating, LLC  Address 1: 1900 Shawnee Mission Parkway  Address 2:	Well Location: NWSWSec18Twp31SR15X East West
Name: Layne Energy Operating, LLC  Address 1: 1900 Shawnee Mission Parkway  Address 2:	
Address 1: 1900 Shawnee Mission Parkway  Address 2: Lity: Mission Woods State: KS Zip: 66205 + Lity: Mission Woods State: KS Zip: 6913 ) 362-0133  Email Address: MARY C GAUT AND/OR KENNETH R GAUT AND/OR WANDA M DAUGHERTY Address 1: 1984 CR 5400  Address 1: 1984 CR 5400 State: KS Zip: 67344 + Lity: Mission William State: KS Zip: 67344 + Lity: Mission William State: KS Zip: 67344 + Lity: Mission Woods Reversed In the KCC with a plat showing the predicted locations of lease roads, tank bath are preliminary non-binding estimates. The locations may be entered on the Select one of the following:	County: Montgomery  Lease Name: GAUT  Well #: 12-18  If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:  When filing a Form T-1 involving multiple surface owners, attach an additional theet 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
Address 2:  City: Mission Woods  State: KS  Zip: 66205  Contact Person: Victor H. Dyal  Phone: ( 913 ) 362-0510  Fax: ( 913 ) 362-0133  Email Address:  Surface Owner Information:  Name: MARY C GAUT AND/OR KENNETH R GAUT AND/OR WANDA M DAUGHERTY  Address 1: 1984 CR 5400  Address 2:  City: ELK CITY  State: KS  Zip: 67344  Form C-1 (Intent) or CB-1 (Cathodic Fithe KCC with a plat showing the predicted locations of lease roads, tank bath are preliminary non-binding estimates. The locations may be entered on the Select one of the following:	f filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:  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
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the KCC with a plat showing the predicted locations of lease roads, tank bate are preliminary non-binding estimates. The locations may be entered on the Select one of the following:	
	teries, pipelines, and electrical lines. The locations shown on the plat
I certify that, pursuant to the Kansas Surface Owner Notice Act (howner(s) of the land upon which the subject well is or will be locate 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 expressions.	ed: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form g 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 acknowledge that I am being charged a \$30.00 handling fee,	s). To mitigate the additional cost of the KCC performing this
If choosing the second option, submit payment of the \$30.00 handling fee form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will	
I hereby certify that the statements made herein are true and correct to the	
>60 W	best of my knowledge and belief.
Date: 12/1/12 Signature of Operator or Agent:	

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