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

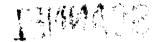
REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE PIT PERMIT

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**	Effective Date of Transfer: October 1, 2012
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 230625
Gas Gathering System:	Lease Name: SKELTON
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	Legal Description of Lease: T 30 South, R 17 East Sec 34:
feet from L E / W Line	The (S/2 SW/4) EXCEPT: About 3 acres in SW corner.
Enhanced Recovery Project Permit No.:	
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)	
Type of Pit: Emergency Burn Settling	Haul-Off Workover pc Drilling
	· · · · · · · · · · · · · · · · · · ·
Past Operator's License No	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	Date: December 1, 2012
Title: President	Signature:
	Oignaturo.
New Operator's License No.	Contact Person: John G. Burke
·	Phone: 214-691-5800
New Operator's Name & Address: LR Energy, Inc. 8150 N. Central Expressway, Suite 1605	DEO 2 o o o
Dallas, TX 75206	Date: December 1, 2012 KCC WICHITA
Title: Chief Operating Officer	Signature:
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # has been
noted, approved and duly recorded in the records of the Kansas Corporation C	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the a	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 / /	
l / '	PRODUCTION
Mail to: Past Operator New Operato	District

100112_Skelton.pdf

Must Be Filed For All Wells



KDOR Lease No.:	230625		
KDOR Lease No.:	230625		

* Lease Name: SKELTON		* Location:*					
Well No. API No. (YR DRLD/PRE '67)			e from Section L Feet from South		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
14-34	15-205-27562 /	691 (S	cle /FNL <u>202</u> 4	Circle FEL/FW	СМ	PROD	
		FSI		FEL/FWL			
		FSI		FEL/FWL			
		FSI		FEL/FWL			
		FSI		FEL/FWL			
		FSI	_/FNL	FEL/FWL			
		FSI	_/FNL	FEL/FWL			
		FSI		FEL/FWL			
		FSI	_/FNL	FEL/FWL			
		FS	JFNL	FEL/FWL			
		FS	L/FNL	FEL/FWL			
		FS	L/FNL	FEL/FWL			
-		FS	L/FNL	FEL/FWL			
		FS	L/FNL	FEL/FWL		_	
		FS	L/FNL	FEL/FWL	· · · · · · · · · · · · · · · · · · ·		
		FS	L/FNL	FEL/FWL			
		FS	L/FNL	FEL/FWL			
		FS	L/FNL	FEL/FWL			
WARRIED TO THE PARTY OF THE PAR		FS	L/FNL	FEL/FWL			
		Fs	L/FNL	FEL/FWL			
		FS	L/FNL	FEL/FWL			
		FS	L/FNL	FEL/FWL		RECEIVED	
	_	FS	L/FNL	FEL/FWL		DEC 2 8 2012	
		FS	L/FNL	FEL/FWL		KCC WICHITA	

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



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 (C	athodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
33365			
OPERATOR: License # 33365 Name: Layne Energy Operating, LLC Address 1: 1900 Shawnee Mission Parkway	Well Location:SE_SW_Sec. 34 Twp. 30 S. R. 17 East West		
Name: 1900 Shawnee Mission Parkway	County: Wilson		
Address 1:	Lease Name: SKELTON Well #: 14-34		
Address 2: KS - 66205	If filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below:		
City: State: Zip:+			
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: BRADLEY A CLAMPITT & DIANA CLAMPITT REVOCABLE TRUST Address 1: 2328 W SOUTHGATE 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, tank	dic Protection Borehole Intent), you must supply the surface owners and batteries, pipelines, and electrical lines. The locations shown on the plat at the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
Select the of the following.			
I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be loced CP-1 that I am filing in connection with this form; 2) if the form beform; and 3) my operator name, address, phone number, fax, and	cated: 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		
☐ I have not provided this information to the surface owner(s). I ac KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling	cknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this fee, 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 I 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:)inner Title: President		
Signature of Operator of Agents	RECEIVED		

DEC 2 8 2012

KCC WICHITA