

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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Form T-1 March 2010

Form must be Typed
Form must be Signed
All blanks must be Filled

RECEIVED REQUEST FOR CHANGE OF OPERATOR RECEIVEDTRANSFER 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: __2/1/13 Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 106116 Gas Gathering System: Lease Name: D. E. BERTHOLF Saltwater Disposal Well - Permit No.: ___ _- ___ Sec. 23 Twp. 29S R. 8 FV W _____ feet from N / S Line Spot Location: ___ Legal Description of Lease: SW/4 OF SEC 23-T29S-R8W __ feet from __ E / W Line Enhanced Recovery Project Permit No.: _ County: KINGMAN KCC WICHIT Entire Project: Yes No Number of Injection Wells _ Production Zone(s): MISSISSIPPI FEB 06 2014 Field Name: BELMONT CENTER Injection Zone(s):_ RECEIVED feet from N / S Line of Section Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) E / W Line of Section feet from Haul-Off Drilling Type of Pit: Emergency Burn Settling Workover Contact Person: __CASEY MUSGROVE 34058 / Past Operator's License No. Past Operator's Name & Address: __MUSGROVE ENERGY INC Phone: 580-761-3320 Date: ___ P O BOX 2287, PONCA CITY, OK 74602-2287 Title: VICE-PRESIDENT Signature: Contact Person: JIM BYERS New Operator's License No. . New Operator's Name & Address: APOLLO ENERGIES, INC Phone: 620-672-9001 Oil / Gas Purchaser: _NCRA/WEST WICHITA GATHERING 10378 N US HWY 281, PRATT, KS 67124 Date: 02/01/13 **PRESIDENT** Title: 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 permitted by No.: _____ . Recommended action: Date: Authorized Signature Authorized Signature DISTRICT __ Mail to: Past Operator _ **New Operator**

KCC WICHITA

FEB 0 6 2014

Side Two

Must Be Filed For All Wells

KDOR Lease No.: 106116 RECEIVED

Lease Name:	D. E. BERTHOLF		* Location:S	SW/4 SECTION 23-T295	S-R8W
Well No.	API No. (YR DRLD/PRE '67)	Footage from S (i.e. FSL = Feet from		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
11	15-095-20023 <i>-00-01</i>	2022 FSLJFNL	4487 Circle	OIL	PRODUCING
2	15-09520388 🗸	595 FSLIPNL	4716 (FEL)FWL	OIL	PRODUCING
3	15-095-20396	788 FSL/FNL	3419 (FEL)FWL	OIL	PRODUCING
4	15-095-20510 40-01	2095 FSL)FNL	3342 FEL/FWL	OIL	PRODUCING
		FSL/FNL	FEL/FWL		
			FEL/FWL		
		FSL/FNL	FEL/FWL	***	
		FSL/FNL	FEL/FWL		
		501 (5NI)			
		FSL/FNL	FEL/FWL		
		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.

OPERATOR: License # 30481	Mall Language		
Name: APOLLO ENEREGIES, INC	Well Location:		
Address 1: 10378 N US HWY 281	SW Sec. 23 Twp. 29S S. R. 8 East X West County: KINGMAN		
Address 2:	Lease Name: D. E. BERTHOLT Well #: 1, 2, 3, 4		
City: PRATT State: KS Zip: 67124 + 7920			
SUF BYERS	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Phone: (620) 672-9001 Fax: (620) 672-1224	SW/4 SEC 23-T29S-R8W		
Phone: (620) 672-9001 Fax: (620) 672-1224 Email Address: sue@apolloenergies.com	CSONA FEE KCC WICHITA		
	PAID FEB 0.6 2014		
Surface Owner Information:	17110		
Name: MICHAEL MOLITOR	RECEIVED 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.		
Address 1: 10181 SW 90th STREET			
Address 2:			
City: SPIVEY State: KS Zip: 67142 +			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cat	hodic Protection Borehole Intent), you must supply the surface owners and		
ine NOO with a plat showing the predicted locations of lease roads, ta	hodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat don the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
The NOO with a plat showing the predicted locations of lease roads, ta	ank patteries pipelines and electrical lines. The locations shown on the plat.		
are preliminary non-binding estimates. The locations or lease roads, to are preliminary non-binding estimates. The locations may be entered select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	e Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form means filed is a Form C-1 or Form CB-1, the plat(s) required by this		
 Ace of whit a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax. I have not provided this information to the surface owner(s). 	Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form to being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this		
 I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the forr form; and 3) my operator name, address, phone number, fax I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 handling the choosing the second option, submit payment of the \$30.00 handling the choosing the second option, submit payment of the \$30.00 handling the second option, submit payment of the \$30.00 handling the second option, submit payment of the \$30.00 handling the second option. 	Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this, and email address. I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ang fee, payable to the KCC, which is enclosed with this form.		
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