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

\_ is acknowledged as

the new operator of the above named lease containing the surface pit

Authorized Signature

## 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: MUST be submitted with this form. ✓ Oil Lease: No. of Oil Wells \_\_\_1 Effective Date of Transfer: 12/1/13 Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 111817 Gas Gathering System: Lease Name: PETERS B-1 aka Peters West B-1 Saltwater Disposal Well - Permit No.: \_\_\_ \_ <u>SE \_ NE \_ NE Sec. \_26 Twp. \_198 R. \_1</u> \_\_ E / W \_\_ feet from \_\_ N / \_\_ S Line Legal Description of Lease: ... N/2 NE/4 LS TR SEC 26-19S-1W feet from E / W Line Enhanced Recovery Project Permit No.: \_\_\_ Entire Project: Yes No County: MCPHERSON Number of Injection Wells Production Zone(s): MISSISSIPPIAN 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) E / W Line of Section Type of Pit: Emergency Burn Settling Haul-Off Workover Past Operator's License No. Alan DeGood Contact Person: Trek AEC, LLC Phone: 316-263-5785 Past Operator's Name & Address: 155 N. Market, Suite 710 Title: Vice President Signature: New Operator's License No. Contact Person: TODD BAUER New Operator's Name & Address: TODD BAUER Phone: 620-489-6240 RECEIVED-KANSAS CORPORATION COMMISSION 3020 HWY 56, WINDOM, KS 67491 NCRA Oil / Gas Purchaser JAN 1 3 2014 Title: OWNER CONSERVATION DIVISION Signature: WICHITA, KS 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.

> PRODUCTION New Operator District

permitted by No.: \_\_

\_\_\_ is acknowledged as

the new operator and may continue to inject fluids as authorized by

Date:

DISTRICT \_\_\_

Mail to: Past Operator \_

\_\_\_\_\_. Recommended action:

Authorized Signature

Side Two

## Must Be Filed For All Wells

Lease Name:	No.: 111817 PETERS B-1 aka Peters	West B-1	* Location:S	E NE NE SEC 26-19S-1	W, MCPHERSON CO., KS
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)
B-1	15-113-20399	Circle 4290 S FSL/FNL	330 E Circle FEL/FWL	OIL	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		
	Ã.	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
		FSL/FNL			
			FEL/FWL		
<u></u>			FEL/FWL		
		FSL/FNL			
J					
		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 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 # 34501	
Name: TODD BAUER	Well Location:
Address 1: 3020 HWY 56	SE_NE_NE_Sec. 26 Twp. 19 S. R. 1 East X West
Address 2:	County: MCPHERSON
City: WINDOM State: KS 7: 67491	County: MCPHERSON  Lease Name: PETERS aka Peters West Well #: B-1
Contact Person: TODD BAUER	— If filing a Form T-1 for multiple wells on a lease, enter the legal description o the lease below:
Phone: ( 620 ) 489-6240 Fax: ()	
Email Address:	
ANSAS CORPORA	TON COMMISSION
Surface Owner Information:  Name: JAMES PETERS REV LIVING TR	3 2014
Address 1: 5822 SW CLARION LAKES WAY	When filing a Form T-1 involving multiple surface owners, attach an additional  ON DIVISIONET listing all of the information to the left for each surface owner. Surface  FA, KS owner information can be found in the records of the register of deeds for the
Address 2:	owner information can be found in the records of the register of deeds for the
City: TOPEKA State: KS Zip: 66610	county, and in the real estate property tax records of the county traceuror
	<del></del>
If this form is being submitted with a Form C-1 (Intent) or CB-1 ((	Cathodic Protection Borobolo Intent)
are preliminary non-binding estimates. The locations may be ente  Select one of the following:  X I certify that, pursuant to the Kansas Surface Owner Not	Cathodic Protection Borehole Intent), you must supply the surface owners and so, tank batteries, pipelines, and electrical lines. The locations shown on the plat ared on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  The surface owners and supply the surface of the
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will	tice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1.
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filling in connection with this form; 2) if the form; and 3) my operator name, address, phone number, f	tice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, Form T-1, or Form
I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, form 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 hand.	tice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this fax, and email address.  1) I acknowledge that, because I have not provided this information, the ce owner(s). To mitigate the additional cost of the KCC performing this idling fee, payable to the KCC, which is enclosed with this form.
Are preliminary non-binding estimates. The locations may be enterested one of the following:  I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, form; and 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 hands form and the associated Form C-1, Form CB-1, Form T-1, or Form form and the associated Form C-1, Form CB-1, Form T-1, or Form	tice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this fax, and email address.  1) I acknowledge that, because I have not provided this information, the ce owner(s). To mitigate the additional cost of the KCC performing this idling fee, payable to the KCC, which is enclosed with this form.  2) I acknowledge that the fee is not received with this form, the KSONA-1 of CP-1 will be returned.
I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the f form; and 3) my operator name, address, phone number, f   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 hand following the second option, submit payment of the \$30.00 hands.	tice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this fax, and email address.  1). I acknowledge that, because I have not provided this information, the ce owner(s). To mitigate the additional cost of the KCC performing this idling fee, payable to the KCC, which is enclosed with this form.  1) If the fee is not received with this form, the KSONA-1 of CP-1 will be returned.