## 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 Compilance with the Kansas Surface Owner Notification Act, MUST be submitted with this form.

Check Applicable Boxes:	UST DE SUDMITTED WITH THIS TORM.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: March 1, 2	014		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 204391	04391		
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:	CNWSec18Twp28_	D 31		
Spot Location: feet from N /	Sine I			
feet from E /	W Line Legal Description of Lease: C NW 18-28-3	IVV		
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County: HASKELL	KCC WICHIT		
Number of Injection Wells **	Production Zone(s): CHASE	MAD 0.3 2044		
Field Name: HUGOTON		MAR 0 3 2014		
** Side Two Must Be Completed.	Injection Zone(s):	RECEIVED		
Surface Pit Permit No.:	feet from	ine of Section		
(API No. if Drill Pit, WO or Haul)	feet from F / W L	ine of Section		
Type of Pit: Emergency Burn Set	tling			
Past Operator's License No. 9280	Contact Person: LAWRENCE WITHERS	KCC WICHITA		
Past Operator's Name & Address: LAWRENCE WITHER	RS (620) 668-5589	1440 40 0041		
2298 90TH RD COPELAND KS 67837	Date: 22514	MAR 19 2014		
Title: OWNER/OPERATOR	Signature: Jum With	RECEIVED		
New Operator's License No. 31006 /	Contact Person: PRESTON WITHERS			
New Operator's Name & Address: WESTERN PACIFIC FARM				
2257 100TH ROAD COPELAND KS 67837	Oil/Gas Purchaser: Irrigation	Use		
	Date: Z-ZS-/X			
Title: PRESIDENT, PRESTON WITHERS	Signature: furtility	A		
Acknowledgment of Transfer: The above request for transf	er of injection authorization, surface pit permit #	has been		
noted, approved and duly recorded in the records of the Kansa	s Corporation Commission. This acknowledgment of transfer pertage	ains to Kansas Corporation		
Commission records only and does not convey any ownership	interest in the above injection well(s) or pit permit.			
is acknown	owledged as	is acknowledged as		
the new operator and may continue to inject fluids as au	thorized by the new operator of the above named lease	containing the surface pit		
Permit No.: Recommended action:	permitted by No.:			
Date:	Date:			
Authorized Signature	/ Authori.	zed Signature		
DISTRICT EPR 3/20/1	PRODUCTION MAR 2 1 2014 UK	3-21-14		
Mail to: Past Operator	New Operator District _	· · · · · · · · · · · · · · · · · · ·		

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

#### Side Two

### Must Be Filed For All Wells

* Lease Name	WESTERN FARMS #3		* Location: _C	NW 18-28S-31W	
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
#3	/ 15-081-20261 (1982)	1320 Circle	1320 Circle	GAS	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		<b>-</b>
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		****
	·	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		F\$L/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		KCC WICHITA
		FSL/FNL	FEL/FWL		MAR 1 9 2014
		FSL/FNL	FEL/FWL		RECEIVED
			FEL/FWL		KCC WICHITA
		FSL/FNL			MAR 03 2014
			FEL/FWL		RECEIVED
		FSL/FNL	FEL/FWL		
		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 January 2014 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 # 31006	Well Location:		
Name: WESTERN PACIFIC FARMS, INC.	CNW Sec. 18 _Twp. 28 _S. R. 31 East ▼ West		
OPERATOR: License # 31006  Name: WESTERN PACIFIC FARMS, INC.  Address 1: 2257 100TH RD	County: HASKELL		
Address O.	Lassa Nome: WESTERN FARMS Mail #. 3		
City: COPELAND State: KS Zip: 67837 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Contact Person: PRESTON WITHERS			
Phone: ( 620 ) 668-5630 Fax: ( NA )	_		
Contact Person: PRESTON WITHERS Phone: ( 620 ) 668-5630 Fax: ( NA )  Email Address: pwithers@ucom.net	_		
Surface Owner Information:			
Name: WESTERN RANCHES, INC.	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		
Address 1: 977 UU RD			
Address 2:	county, and in the real estate property tax records of the county treasurer.		
City: COPELAND State: KS Zip: 67837 +	_		
Select one of the following:	d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
owner(s) of the land upon which the subject well is or will b	e Act (House Bill 2032), I have provided the following to the surface the located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the being filed is a Form C-1 or Form CB-1, the plat(s) required by this k, and email address.		
KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ess of the surface owner by filling out the top section of this form and		
KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the second option, submit payment of the \$30.00 handlifform and the associated Form C-1, Form CB-1, Form T-1, or Form CB hereby certify that the statements made herein are true and derived	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ess of the surface owner by filling out the top section of this form and ne KCC, which is enclosed with this form.  In the fee is not received with this form, the KSONA-1 CP-1 will be returned.		
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