

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 \_\_\_\_\_ \*\*
- ☐ Gas Lease: No. of Gas Wells \_\_\_\_\_ \*\*
- ☐ Gas Gathering System: \_\_\_\_\_
- ☒ Saltwater Disposal Well - Permit No.: d-28314
- Spot Location: 3960 feet from ☐ N / ☒ S Line
- 1320 feet from ☒ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: \_\_\_\_\_
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells \_\_\_\_\_ \*\*

Field Name: Wide Awake Ext.**\*\* Side Two Must Be Completed.**Effective Date of Transfer: 2-1-2014 4/8/14KS Dept of Revenue Lease No.: N/ALease Name: Mudd TrustE - - - NE - - - Sec. 12 Twp. 35 R. 35 ☐ E ☒ W

Legal Description of Lease: \_\_\_\_\_

NE Corner of Sec. 12, TWP 35, R 35 West of the 6th P.M.County: Steven, KS**KCC WICHITA**

Production Zone(s): \_\_\_\_\_

Injection Zone(s): Lower Council Grove**APR 25 2014****RECEIVED**Surface Pit Permit No.: \_\_\_\_\_  
(API No. if Drill Pit, WO or Haul)\_\_\_\_\_ feet from ☐ N / ☐ S Line of Section\_\_\_\_\_ feet from ☐ E / ☐ W Line of SectionType of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover OR ☐ DrillingPast Operator's License No. 34745 ✓Contact Person: Greg PipkinPast Operator's Name & Address: Globe Energy Services, LLCPhone: 806-894-3151PO Box 255 Snyder, TX 79550Date: 4-23-14Title: CFOSignature: Greg PipkinNew Operator's License No. 35062 ✓Contact Person: Erica MonkNew Operator's Name & Address: Wichita Water, LLCPhone: 806-894-1457PO Box 848

Oil / Gas Purchaser: \_\_\_\_\_

Levelland, TX 79336Date: 4-23-14Title: WW AdministratorSignature: Erica Monk

**Acknowledgment of Transfer:** The above request for transfer of injection authorization, surface pit permit # \_\_\_\_\_ has been 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.

Wichita Water, LLC \_\_\_\_\_ is acknowledged as

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

Permit No.: d-28314 . Recommended action: NeedU30's for 2012-2013Date: 5-13-14 . Cheryl K. Beyer

Authorized Signature

\_\_\_\_\_ is acknowledged as

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

permitted by No.: \_\_\_\_\_ .

Date: \_\_\_\_\_

Authorized Signature

DISTRICT 1 5/12/14 EPR 5/12/14 PRODUCTION MAY 14 2014 UIC 5-13-14Mail to: Past Operator 5-13-14 New Operator 5-13-14 District 1 5-13-14

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

144 9/5

N/A ✓

\* Location: E, NE, Sec 12, T35, R35 West, Steven Co., KS

Well Status  
(PROD/TA'D/Abandoned)

[illegible]

**KCC WICHITA**

~~APR 25 2014~~

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\* 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**

Form KSONA-1  
January 2014  
**Form Must Be Typed**  
**Form must be Signed**  
**All blanks must be Filled**

*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 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35062  
Name: Wichita Water, LLC  
Address 1: PO Box 848  
Address 2: \_\_\_\_\_  
City: Levelland State: TX Zip: 79336 + \_\_\_\_\_  
Contact Person: Erica Monk  
Phone: (806) 894-1457 Fax: (806) 894-1291  
Email Address: erica.monk@wichita-water.com

Well Location:  
E - NE - Sec. 12 Twp. 35 S. R. 35 ☐ East ☒ West  
County: Steven  
Lease Name: Mudd Trust Well #: 1

*If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:*

**Surface Owner Information:**

Name: Paul Blaser  
Address 1: Rt. 1 Box 41A  
Address 2: \_\_\_\_\_  
City: Tyrone State: OK Zip: 73951 + \_\_\_\_\_

*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.*

*If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.*

**Select one of the following:**

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

*If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.*

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 4-23-14 Signature of Operator or Agent: [Signature] Title: WW Administrator

**KCC WICHITA**  
**APR 25 2014**  
**RECEIVED**