

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 2 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: 1550 feet from ☐ N / ☒ S Line
780 feet from ☒ E / ☐ W Line
- ☒ Enhanced Recovery Project Permit No.: E 17400
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells 1 **

Field Name: Wilhelm**** Side Two Must Be Completed.**Effective Date of Transfer: October 8, 2013KS Dept of Revenue Lease No.: 144723 ✓Lease Name: Wilhelm/WickeS/2 - NE - SE - Sec. 20 Twp. 01 R. 32 ☐ E ☒ WLegal Description of Lease: The West Half of the Northwest Quarter
The East Half (E/2)County: RawlinsProduction Zone(s): Kansas City-LansingInjection Zone(s): NASurface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☒ Drilling

Past Operator's License No. 3602 Exp. 10/30/09

Past Operator's Name & Address: Philpott Oil and Gas
408 Main Street, Atwood, Kansas 67730

Title: Owner

Contact Person: Roger Philpott **KCC WICHITA**

Phone: 785-626-3011

Date: March 18, 2014 **MAR 21 2014**

Signature: Roger Philpott **RECEIVED**

New Operator's License No. 34530

New Operator's Name & Address: Bow Creek Oil Company, LLC
1304 Eisenhower Road, Hays, Kansas 67601

Title: Owner

Contact Person: Tony Stroup **KCC WICHITA**

Phone: 785-650-1738

Oil / Gas Purchaser: Coffeerville Resources

Date: March 18, 2014 **APR 14 2014**

Signature: Tony Stroup **RECEIVED**

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.

Bow Creek Oil Company LLC is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: E-17400 . Recommended action: Violation
MITT OVERDUE (2012) + Need UIC 20082012
Date: 4-28-14 (Cheryl K. Boyer)
Authorized Signature

_____ is acknowledged as
the new operator of the above named lease containing the surface pit
permitted by No.: _____ .
Date: _____
Authorized Signature

DISTRICT _____	EPR <u>4/14/14</u>	PRODUCTION <u>MAY 05 2014</u>	UIC <u>4-28-14</u>
Mail to: Past Operator <u>4-28-14</u>	New Operator _____	District <u>4</u>	<u>4-28-14</u>

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

* Location: (E/2) 20-01-32

* 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 # 34530
Name: Bow Creek Oil company, LLC
Address 1: 1304 Eisenhower Road
Address 2: _____
City: Hays State: KS Zip: 67601 + _____
Contact Person: Tony Stroup
Phone: (785) 650-1738 Fax: (_____) _____
Email Address: bowcreekoil@gmail.com

Well Location: W/2 SE NE Sec. 20 Twp. 01 S. R. 32 ☐ East ☒ West
County: Rawlins
Lease Name: Wilhelm/Wicke Well #: 22 & 23

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

The East Half (E/2) Sec 20 Twp 01 Range 32

Surface Owner Information:

Name: Ernie Wicke
Address 1: 27797 Road Bb
Address 2: _____
City: Atwood State: KS Zip: 67730 + _____

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 KCC will not accept the 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: 3-18-2014 Signature of Operator or Agent: Maule K. Shoup Title: Partner/Owner

KCC WICHITA
APR 14 2014
RECEIVED
KCC WICHITA
MAR 21 2014
RECEIVED