

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 31 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☒ Enhanced Recovery Project Permit No.: E31,275
- Entire Project: ☒ Yes ☐ No
- Number of Injection Wells 2 **

Field Name: VERNON

**** Side Two Must Be Completed.**

Effective Date of Transfer: July 22, 2014

KS Dept of Revenue Lease No.: 142594 ✓

Lease Name: HAMMOND

_____ Sec. 8 Twp. 24S R. 16 ☒ E ☐ W

Legal Description of Lease: NE4, S2 NW4, NW4 SE4, E2 SW4

County: WOODSON

KCC WICHITA

Production Zone(s): SQUIRREL

AUG 11 2014

Injection Zone(s): LOWER SQUIRREL **RECEIVED**

Surface 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. 30345/

Past Operator's Name & Address: PIQUA PETRO, INC.

1331 XYLAN RD, PIQUA, KS 66761

Title: VP

Contact Person: MONICA A LAIR

Phone: 620-433-2215

Date: 7/22/14

Signature: Monica Lair

New Operator's License No. 35106 ✓

New Operator's Name & Address: Petroleum Resource

Management Company

675 Bering Drive - Suite 675

Houston, TX 77057

Title: President

Contact Person: T. R. Weddle

Phone: 713-956-4148

Oil / Gas Purchaser: Maclasky Oilfield Services

Date: 8/5/14

Signature: T. R. Weddle

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.

Petroleum Resource Management Company is acknowledged as

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

Permit No.: E-31,275 . Recommended action: NONE

Date: 8-19-14

Authorized Signature

_____ is acknowledged as

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

permitted by No.: _____

Date: _____

Authorized Signature

DISTRICT _____

Mail to: Past Operator 8-19-14

EPR

8-18-14

PRODUCTION

8-19-14

UIC

8-19-14

District 3

8-19-14

Mail to: KCC - Conservation Division, 130 S. Market - Room 207B, Wichita, Kansas 67202

Must Be Filed For All Wells

KCC WICHITA

AUG 11 2014

KDOR Lease No.: 142594 ✓

* Lease Name: HAMMOND LEASE ✓

* Location: S8-T24S-R16E, WOODSON CO

RECEIVED

Well No.	API No. (YR DRLD/PRE '87)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
✓ E 1-12	15-207-28067 ✓	170	Circle FSL/FNL 170 Circle FEL/FWL	OIL	PROD
✓ E 2-12	15-207-28243 ✓	500	FSL/FNL 170 FEL/FWL	OIL	PROD
✓ E 3-12	15-207-28244 ✓	830	FSL/FNL 170 FEL/FWL	OIL	PROD
✓ E 4-12	15-207-28242 ✓	1150	FSL/FNL 170 FEL/FWL	OIL	PROD
✓ E 5-12	15-207-28132 ✓	1480	FSL/FNL 170 FEL/FWL	OIL	PROD
✓ E 6-12	15-207-28119 ✓	1810	FSL/FNL 170 FEL/FWL	OIL	PROD
✓ E 7-12	15-207-28068 ✓	2140	FSL/FNL 170 FEL/FWL	OIL	PROD
✓ E 8-12	15-207-28069 ✓	2470 240	FSL/FNL 170 FEL/FWL	OIL	PROD
✓ E 9-12	15-207-28281 ✓	170	FSL/FNL 500 FEL/FWL	OIL	PROD
E 11-12	15-207-28200 ✓	2470	FSL/FNL 995 FEL/FWL	EOR	ACTIVE
✓ E 11-12	15-207-28419 ✓	830	FSL/FNL 500 FEL/FWL	OIL	PROD
✓ E 12-12	15-207-28420 ✓	1160	FSL/FNL 500 FEL/FWL	OIL	PROD
✓ E 13-12	15-207-28421 ✓	1490	FSL/FNL 500 FEL/FWL	OIL	PROD
✓ E 14-12	15-207-28231 ✓	1810	FSL/FNL 500 FEL/FWL	OIL	PROD
✓ E 15-12	15-207-28230 ✓	2140	FSL/FNL 500 FEL/FWL	OIL	PROD
✓ E 16-12	15-207-28130 ✓	2470	FSL/FNL 500 FEL/FWL	OIL	PROD
✓ E 19-12	15-207-28483 ✓	830	FSL/FNL 830 FEL/FWL	OIL	PROD
✓ E 20-12	15-207-28484 ✓	1160	FSL/FNL 830 FEL/FWL	OIL	PROD
✓ E 24-12	15-207-28131 ✓	2470	FSL/FNL 830 FEL/FWL	OIL	PROD
✓ E 32-12	15-207-28422 ✓	2470	FSL/FNL 1160 FEL/FWL	OIL	PROD
S 1-12	15-207-28077-00-01 ✓	1490	FSL/FNL 2120 FEL/FWL	EOR	ACTIVE
✓ S 2-12	15-207-28118 ✓	1490	FSL/FNL 2470 FEL/FWL	OIL	PROD
✓ E 21-12	15-207-28485 ✓	1490	FSL/FNL 830 FEL/FWL	OIL	PROD
✓ E 33-13	15-207-28638 ✓	170	FSL/FNL 1380 FEL/FWL	OIL	PROD

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.

* Location: S8-T24S-R16E, WOODSON CO

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

**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 # 30345
Name: PIQUA PETRO INC
Address 1: 1331 XLAN RD
Address 2: _____
City: PIQUA State: KS Zip: 66761 + _____
Contact Person: MONICA A LAIR
Phone: (620) 433-2215 Fax: (_____) _____
Email Address: monicalair@gmail.com

Well Location:
_____ Sec. 8 Twp. 24 S. R. 16 ☒ East ☐ West
County: WOODSON
Lease Name: HAMMOND Well #: _____

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
NE4, S2 NW4, NW4 SE4, E2 SW4

Surface Owner Information:

Name: CLIFFORD HAMMOND
Address 1: 815 PENTWOOD DR
Address 2: _____
City: SALINA State: KS Zip: 67401 + _____

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: 7/22/14 Signature of Operator or Agent: Monica Lair Title: VP

KCC WICHITA

AUG 11 2014

RECEIVED

Ammond Lease

T-23-24-S COFFEY CO. LIBERTY E COFFEY CO. R-15-16-E 35

