

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form T-1

July 2014

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.: E-22463

Spot Location: 4950 feet from ☐ N / ☒ S Line

1100 feet from ☐ E / ☒ W Line

☐ Enhanced Recovery Project Permit No.: \_\_\_\_\_

Entire Project: ☐ Yes ☐ No

Number of Injection Wells \_\_\_\_\_ \*\*

Field Name: Ritz-Canton

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

Effective Date of Transfer: September 1, 2014

KS Dept of Revenue Lease No.: 104159 RS

Lease Name: Middleswart

N2 NE4 - - - - - Sec. 9 Twp. 19 R. 2 ☐ E ☒ W

Legal Description of Lease: North Half Northeast Quarter

County: McPherson

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

Injection Zone(s): Arbuckle Mississippi Lime

Surface Pit Permit No.: \_\_\_\_\_ feet from ☐ N / ☐ S Line of Section

(API No. if Drill Pit, WO or Haul)

\_\_\_\_\_ feet from ☐ E / ☐ W Line of Section

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover OK ☐ Drilling

Past Operator's License No. 32495

Past Operator's Name & Address: Edwards Oil Properties

P O Box 961, McPherson, KS 67460

Title: Owner

Contact Person: Jack Edwards

Phone: 620-241-5813

Date: 8-22-14

Signature: [Signature]

New Operator's License No. 35109

New Operator's Name & Address: Randy G. Bacon d/b/a RBOC

2804 Cedar Spring Lane

Wamego, KS 66547

Title: Owner

**AUG 25 2014**

CONSERVATION DIVISION  
WICHITA, KS

Contact Person: Randy G. Bacon

Phone: 620-424-7319

Oil / Gas Purchaser: N/A

Date: 8-22-14

Signature: [Signature]

**Received**  
KANSAS CORPORATION COMMISSION  
**SEP 08 2014**  
CONSERVATION DIVISION  
WICHITA, KS

**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.

Bacon, Randy G. RBOC is acknowledged as

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

Permit No.: E-22,463 . Recommended action: NONE

Date: 9-11-14 Cheryl A. 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 \_\_\_\_\_ EPR 9-10-14 PRODUCTION 9-11-14 UIC 9-11-14

Mail to: Past Operator 9-11-14 New Operator 9-11-14 District 2 9-11-14



KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE  
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1  
July 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 # 35109

Name: Randy G. Bacon d/b/a RBOC

Address 1: 2804 Cedar Spring Lane

Address 2:

City: Wamego State: KS Zip: 66547

Contact Person: Randy G. Bacon

Phone: ( 620 ) 424-7319

Fax: ( ) KANSAS CORPORATION COMMISSION

Email Address:

Well Location:

N2 NE4 Sec. 9 Twp. 19 S. R. 2 East ☐ West ☒

County: McPherson

Lease Name: Middleswart Well #: 2

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

AUG 25 2014

**Surface Owner Information:**

Name: Frank Anderson

Address 1: 2058 Navajo Road

Address 2:

City: Galva State: KS Zip: 67443

CONSERVATION DIVISION  
WICHITA, KS

*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: 8-28-14 Signature of Operator or Agent:

Title: Owner Received

KANSAS CORPORATION COMMISSION

SEP 02 2014

CONSERVATION DIVISION  
WICHITA, KS