KANSAS CORPORATION COMMISSION

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

OIL & GAS CONSERVATION DIVISION

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,
MIST be submitted with this form.

Check Applicable Boxes: MUST be submitted.	ted with this form. I
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 10/15/2012
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 102315 ✓
Gas Gathering System:	Lease Name: Klick
Saltwater Disposal Well - Permit No.:	
Spot Location:feet from N / S Line	1
feet from E / W Line	Legal Description of Lease: s/2 OF S20-T25-R14
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: WOODSON
Number of Injection Wells**	Production Zone(s): BARTLESVILLE
Field Name: QUINCY	Injection Zone(s):
** Side Two Must Be Completed.	Injection Zone(s).
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
Cottling	Haul-Off Workover Drilling
Type of Pit: Emergency Burn Settling	
Past Operator's License No. 30345	Contact Person: MONICA LAIR
Past Operator's Name & Address: PIQUA PETRO INC	Phone: 620-433-2215
1331 XYLAN RD, PIQUA, KS , 66761	Date: 9/18/201/4
Title: VICE PRESIDENT	Signature: 1/2 '
Title:	Signature:
New Operator's License No. 30931	Contact Person: MATT OSBORN
New Operator's Name & Address: DAYSTAR PETROLEUM INC	Phone: 620-583-5527
P O BOX 560	Oil / Gas Purchaser: PACER ENERGY MARKETING
Received KANSAS CARROLL COLUMNS COLUMN	9/18/2011
EURENA, NO 07045	Date: 4/10/4
Title: VICE PRESIDENT SEP 2 5 2014	Signature: //////////
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	
is acknowledged as	is acknowledged as
	the new operator of the above named lease containing the surface pit
the new operator and may continue to inject fluids as authorized by	
Permit No.: Recommended action:	permitted by No.:
	Date
Date: Authorized Signature	Date:
	PRODUCTION OCT 0 1 2014 UIC OCT 0 1 2014
Moil to: Past Operator New Operat	

Side Two

Must Be Filed For All Wells

KDOR Lease	• No.:	1023	15		
* Lease Name:	Klick		* Location: S2	2 OF S20-T25-R14, W	OODSON CO
Well No.	API No. (YR DRLD/PRE '67)	Footage from S (i.e. FSL = Feet from		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
52	15-207-25793-000	Circle 1815 SIJFNL	Circle 5115 FEL FWL	0i1	D/A
	A CONTRACTOR OF THE CONTRACTOR	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		MANUALINA
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	NAME OF THE PROPERTY OF THE PR	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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			FEL/FWL		5 2014
				CONSERVATION	DN DIVIGION

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

Form KSONA-1 July 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 # 30345	_ Well Location:		
Name: PIQUA PETRO INC	<u>S2</u>		
Name: PIQUA PETRO INC Address 1: 1331 XYLAN RD	County: WOODSON Lease Name: KLICK Well #: 52		
	Lease Name: KLICK Well #: 52		
Address 2: City: PIQUA State: KS Zip: 66761 Contact Person: MONICA LAIR Phone: (620) 433-2215 Fax: (620) 468-2204	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: MONICA LAIR	the lease below: S2 OF S20-T25-R14		
Phone: (620) 433-2215 Fax: (620) 468-2204			
Email Address: monicalair@gmail,com	_		
Surface Owner Information: Name: EDWINA H. TRICHLER Address 1: 100 N GREEN	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		
Address 1: APT #8	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.		
A 44maa A. AF I #0			
City: YATES CENTER State: KS Zip: 66783 +			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cat the KCC with a plat showing the predicted locations of lease roads, to	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cat the KCC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat of on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Be Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this		
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SEP 25 2014