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KANSAS CORPORATION COMMISSION

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0001/001FEB 11 2013  
081909 Reiser\_A.pdf  
KCC WICHITAKANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISIONREQUEST FOR CHANGE OF OPERATOR  
TRANSFER OF INJECTION OR SURFACE PIT PERMITForm KSCOA-1, Certification of Compliance with the Kansas Surface Owner Notification Act  
MUST be submitted with this form.Form 94  
March 2009  
Form must be typed  
Form must be signed  
All blanks must be filled

Check Applicable Boxes:

☒ Oil Lease: No. of Oil Wells 1 "

☐ Gas Lease: No. of Gas Wells 0 "

☐ Gas Gathering System: \_\_\_\_\_

☐ Saltwater Disposal Well - Permit No.: \_\_\_\_\_

Spot Location: 3020 feet from ☐ N / ☒ S Line

3059 feet from ☒ E / ☐ W Line

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

Entire Project: ☐ Yes ☐ No

Number of Injection Wells: \_\_\_\_\_

Field Name: Cheese-Silica

\*\* Side Two Must Be Completed.

Effective Date of Transfer: 8-19-09 8-19-09KS Dept of Revenue Lease No.: 118007 #13037 pluggedLease Name: Reiser ANW 04 Sec. 23 Twp. 19 N. 11 W. ☐ E ☒ WLegal Description of Lease: NW/4 of 23-20-11WCounty: Barton

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

Injection Zone(s): \_\_\_\_\_

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 ☐ Blum ☐ Settling ☐ Haul-Off ☐ Workover OR ☐ DrillingPast Operator's License No. 32302 Exp. 10/30/07Past Operator's Name & Address: Mike McNauiKey Gas Corp. 505 S. Broadway, KS 67202Title: V.P.Contact Person: Mike McNaui

Phone: \_\_\_\_\_

Date: 2-9-13Signature: Mike McNauiNew Operator's License No. 6292 ✓New Operator's Name & Address: Schack Oil Operations211 S. FrontRussell, KS 67665Title: OwnerContact Person: Tim SchackPhone: 785-483-4098Oil / Gas Purchaser: NORADate: 2-9-13Signature: Timothy F. Schack

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.

\_\_\_\_\_ is acknowledged as  
the new operator and may continue to inject fluids as authorized by  
Permit No.: \_\_\_\_\_ Recommended action: \_\_\_\_\_

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

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 3-4-15 PRODUCTION 3-5-15 UIC 3-5-15

Mail to: Past Operator \_\_\_\_\_

New Operator \_\_\_\_\_

District \_\_\_\_\_

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

**Must Be Filed For All Wells**

\* Location: 23.205.11W

12-23-13

by opr. 9292  
Scheek Oil

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\* When transferring a unit which consists of more than one lease please file a separate slide 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 2010

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.*

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 9292  
Name: Scheck Oil Operations  
Address 1: 211 S. Front  
Address 2: \_\_\_\_\_  
City: Russell State: KS Zip: 67665 + \_\_\_\_\_  
Contact Person: Tim Scheck  
Phone: ( 785 ) 483-4096 Fax: ( 785 ) 483-4096  
Email Address: scheckoil@ruralnet.net

Well Location:  
NW SE SE NW Sec. 23 Twp. 20 S. R. 11 ☐ East ☒ West  
County: BARTON  
Lease Name: Reiser A 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: Homer Reiser  
Address 1: 801 N. Humbolt Ave  
Address 2: \_\_\_\_\_  
City: Ellinwood State: KS Zip: 67526 + \_\_\_\_\_

*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 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: 2-9-13 Signature of Operator or Agent: [Signature] Title: Office Manager

Mail to: KCC - Conservation Division, 130 S. Market - Room 2079, Wichita, Kansas 67202

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TO:  
STATE CORPORATION COMMISSION  
CONSERVATION DIVISION - PLUGGING  
130 SOUTH MARKET, SUITE 2078  
WICHITA, KANSAS 67202

API Well Number: 15-009-21795-00-00  
Spot: NWSESENW Sec/Twnshp/Rge: 23-20S-11W  
3020 feet from S Section Line, 3059 feet from E Section Line  
Lease Name: REISER A Well #: 1  
County: BARTON Total Vertical Depth: 3285 feet

Operator License No.: 9292  
Op Name: SCHECK, TIMOTHY DBA SCHECK OIL  
Address: 211 S FRONT ST  
RUSSELL, KS 67665

String	Size	Depth (ft)	Pulled (ft)	Comments
PROD	5.5	3281		100 SX
SURF	8.625	223		170 SX

Well Type: OIL UIC Docket No: \_\_\_\_\_ Date/Time to Plug: 12/23/2013 8:00 AM  
Plug Co. License No.: 31529 Plug Co. Name: MIKE'S TESTING & SALVAGE, INC.  
Proposal Rcvd. from: TIM SCHECK Company: SCHECK OIL Phone: (785) 483-4096

Proposed Plugging Method: Ordered 400 sx 60/40 pozmix 4% gel cement and 12 sx gel.

Plugging Proposal Received By: CASE MORRIS WitnessType: COMPLETE (100%)  
Date/Time Plugging Completed: 12/23/2013 3:00 PM KCC Agent: BRUCE RODIE

Actual Plugging Report:

Perfs:

Perforated at 1400', 490' and 200'.  
Ran tubing to 3100' and pumped 12 sx gel followed by 50 sx cement. Pulled tubing to 1400' and pumped 90 sx cement. Pulled tubing to 490'. Circulated cement to surface on casing and surface pipe w/150 sx cement. Pulled tubing and topped off w/5 sx cement.

GPS: 38.29813 -098.50854

Remarks: COPELAND ACID AND CEMENTING

Plugged through: CSG

District: 04

Signed

*Bruce Rodie*  
*02/07/14*

(TECHNICIAN)

KCC WICHITA

CM

DEC 27 2013

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Form CP-2/3