

**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: \_\_\_\_\_ feet from  N /  S Line  
\_\_\_\_\_ feet from  E /  W Line
- Enhanced Recovery Project Permit No.: E27592.1
- Entire Project:  Yes  No
- Number of Injection Wells 1 \*\*

Field Name: Jorn Olive-John  
**\*\* Side Two Must Be Completed.**

Effective Date of Transfer: 04/01/2015  
 KS Dept of Revenue Lease No.: 116528 ✓  
 Lease Name: Jorn Unit  
 \_\_\_\_\_ NW - NE Sec. 13 Twp. 2 R. 28  E  W  
 Legal Description of Lease: NW/4 of Section 13-2-28W  
E/2E/2 of Section 14-2-28W  
 County: Decatur  
 Production Zone(s): Lansing Kansas City  
 Injection Zone(s): LANSING-KANSAS CITY

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 Section

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

Past Operator's License No. 31100 ✓  
 Past Operator's Name & Address: Robuck Petroleum, LLC  
PO Box 1896 Edwards, CO 81632  
 Title: Managing Member

Contact Person: Brett Robuck  
 Phone: (308) 340-3242  
 Date: 04/03/2015  
 Signature: [Signature]

New Operator's License No. 31569 ✓  
 New Operator's Name & Address: Bach, Jason dba Bach Oil Production  
PO Box 723 Alma, NE 68920  
 Title: President

Contact Person: Jason Bach  
 Phone: (308) 928-8920  
 Oil / Gas Purchaser: NCRA  
 Date: 04/13/2015  
 Signature: [Signature]

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**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.

Bach, Jason dba Bach Oil Production is acknowledged as  
 the new operator and may continue to inject fluids as authorized by  
 Permit No.: E-27,592 . Recommended action: None  
 Date: 4-28-15 [Signature]  
 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>4-24-14</u>	PRODUCTION <u>5-4-15</u>	UIC <u>4-28-15</u>
Mail to: Past Operator <u>4-28-15</u>	New Operator <u>4-28-15</u>	District <u>(A)</u>	<u>4-28-15</u>



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.

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

OPERATOR: License # 31569  
Name: Bach, Jason dba Bach Oil Production  
Address 1: PO Box 723  
Address 2: \_\_\_\_\_  
City: Alma State: NE Zip: 68920 + \_\_\_\_\_  
Contact Person: Nick Simonson  
Phone: (308) 928-8920 Fax: (308) 928-8920  
Email Address: \_\_\_\_\_

Well Location:  
\_\_\_\_\_ E/2 \_\_\_\_\_ Sec. 14 Twp. 2 S. R. 28  East  West  
County: Decatur  
Lease Name: Barratt Well #: 2

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

KCC WICHITA NW 1/4 sec 13-2-28 W  
APR 17 2015 E/2 E/2 Sec 14-2-28 W  
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**Surface Owner Information:**

Name: Rita Barratt  
Address 1: 110 S. Beaver  
Address 2: \_\_\_\_\_  
City: Oberlin State: KS Zip: 67749 + \_\_\_\_\_

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: 02/14/15 Signature of Operator or Agent: Nick Simonson Title: Agent/Lease Manager



**Additional Surface Owners Addresses**

Name

Address *(Attach additional sheets if necessary)*

James Reeves

404 N Penn, Oberlin, KS 67749

Royce Cook

PO Box 83, Selden, KS 67757

**KCC WICHITA**  
**APR 17 2015**  
**RECEIVED**