### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

072915\_Pfeifer.pdf

pdf 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,

Check Applicable Boxes:	meo win tus iom. 1		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 7-29-15  KS Dept of Revenue Lease No.: 4640863287		
Gas Lease: No. of Gas Wells**			
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	SE_NW_SW_NE_Sec22_Twp13_R20EVW		
feet from E / W Line	Legal Description of Lease: Northeast Quarter of Section 22,		
Enhanced Recovery Project Permit No.:	Township 13 South, Range 20 W, Ellis Co., KS  County: Ellis  Production Zone(s): Arbuckle		
Entire Project: Yes No			
Number of Injection Wells **			
Field Name: Wildcat			
** 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		
Type of Pit: Emergency Burn Settling	Haul-Off Workover DR Drilling		
Past Operator's License No. 31240	Contact Person: Steve Weilert		
Past Operator's Name & Address: Enterprise, Inc. (Steve Weilert)	Phone: 785-628-1170 KCC WICHIT		
2708 Barclay Drive, Hays, KS 67601			
	Date: O XW /		
Title: President	organical designation of the second of the s		
32504 /	Aaron I Werth		
New Operator's License No. 32504 √	Contact Person: Aaron J Werth		
New Operator's Name & Address: Blackhawk Production Company	Phone: 785-650-1782		
1607 Oakmont St., Hays, KS 67601	Oil / Gas Purchaser: Plains Marketing		
	Date: Mun Filly 5		
Title: Owner/Operator	Signature: 826-/5-		
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
is acknowledged as	is acknowledged as		
·			
the new operator and may continue to inject fluids as authorized by	the new operator of the above named lease containing the surface pit		
Permit No.: Recommended action:	permitted by No.:		
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR	PRODUCTION 9. 2 · 13 UIC 9-1-15		
Mail to: Past Operator New Operator	tor District		

#### Must Be Filed For All Wells

KDOR Lease	No.: 1040863287	140332			
* Lease Name: _	Dfelfer		* Location:^	NE/4 of 22-13S-20W, Elli	s Co., KS
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1 /5	051-25890-00-00	1660 Circle	2200 FEI FWL	Oil	Producing
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		·
		FSL/FNL	FEL/FWL		
***************************************		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
<del></del>		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
· · · · · · · · · · · · · · · · · · ·		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			-		
······································					
				NC.	C WICHITA
				Al	IG <del>2 8 2015</del>
					RECEIVED
		FSL/FNL	FEL/FWL	<del></del>	
		FSL/FNL	FEL/FWL	<del></del>	

A separate sheet may be attached if necessary

<sup>\*</sup> 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-i 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 (C	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 32504	Well Location:		
Name: Blackhawk Production Company	SE_NW_SW_NE_Sec. 22_Twp. 13_S. R. 20 East West		
Address 1: 1607 Oakmont St.	County: Ellis		
Address 2:	Lease Name: Pfeifer Well #: 1		
City: Hays State: KS Zip: 67601 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Contact Person: Aaron J Werth			
Phone: ( 785 ) 650-1782 Fax: ( )			
Email Address: werth@ruraltel.net			
KCC WICH			
Surface Owner Information: Name: Robert J Pfeifer Address 1: 1721 260th Ave.  Address 2: City: Hays  State: KS  ACC WICHI: AUF, 2 8 2015 RECEIVED	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.		
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered or Select one of the following:	dic Protection Borehole Intent), you must supply the surface owners and batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form reing filed is a Form C-1 or Form CB-1, the plat(s) required by this		
KCC will be required to send this information to the surface ow	exhowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and CC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.		
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.		
8-26-15	Operator		
Date: Signature of Operator or Agent:	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		