

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

090115_Casebeer.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,
MUST be submitted with this form.

Check Applicable Boxes:

- ☒ Oil Lease: No. of Oil Wells 3 **
- ☐ 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.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Neodesha Field

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

Effective Date of Transfer: September 1, 2015

KS Dept of Revenue Lease No.: 100914 ✓

Lease Name: Casebeer

_____ SE - NE Sec. 20 Twp. 33 R. 16 ☒ E ☐ W

Legal Description of Lease: see attachment

County: Wilson

Production Zone(s): Neodesha Sd.

Injection Zone(s): _____

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Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

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

Past Operator's License No. 3880 3830 ✓

Contact Person: J J Hanke

Past Operator's Name & Address: AX&P, Inc.

Phone: 620-331-0144

P.O. Box 1176 Independence, KS 67301

Date: Sept 5, 2015

Title: President

Signature: [Signature]

New Operator's License No. 35122 ✓

Contact Person: Wesley Ketcham

New Operator's Name & Address: Lakeshore Operating LLC

Phone: 773-754-6242

13505 Mur-Len Rd. Olatha, KS 66062

Oil / Gas Purchaser: Pacer Energy Mktg.

Date: _____

Signature: [Signature] 9/23/15

Title: President

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 10-8-15 PRODUCTION 10-9-15 UIC 10-9-15
Mail to: Past Operator _____ New Operator _____ District _____

* Location: SE NE Sec 33- 30-16E

* ^{F+gs.} Corrected 10/8/15 JJ Hanke

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* 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.

KW151: CASEBEER

LESSOR: Adelene Casebeer, et vir
LESSEE: Fred E. Wood
DATE: December 8, 1965
RECORDED: Book 91, Page 31
PROPERTY: SE/4 NE/4 of Section 33; and the SW/4 NE/4
 of Section 34; and the SE/4 NW/4 of Section 34, less
 beginning at the SW/c SE/4 NW/4, thence North 20 rods,
 thence Southeasterly to center of the section, thence West 80
 rods to beginning; all in Township 30, Range 16 East; Also the
 SW/4 NW/4 of Section 34, less beginning at the SE/c SW/4
 NW/4 of said section, thence North 15 rods to the North bank
 of the creek, thence Westerly along the North bank of the
 Creek to the East bank of the Dry Creek, thence South to
 South line of NW/4, thence East to place of beginning; all in
 Township 30, Range 16 East, Wilson County, Kansas

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Casebeer Lease (KW151)

TRACT A: (SE/4 NE/4, Section 33, and that portion of the SW/4 NW/4, Section 34, lying West of the center of Dry Creek):

<u>OWNERS</u>	<u>SURFACE</u>	<u>MINERALS</u>
Albian W. Bailey, Jr., Trustee of the Albian W. Bailey, Jr. Revocable Trust Dated November 9, 2010 802 Iowa Neodesha, KS 66757	1/4 th	1/4 th
Richard Lane Bailey, Trustee of the Richard Lane Bailey Revocable Trust Dated January 17, 2011 218 Edgewood Drive Wellsville, KS 66092	1/4 th	1/4 th
L. Pauline Reichardt, Trustee of the L. Pauline Reichardt Revocable Trust Dated March 8, 2011 705 Lakewood Court Augusta, KS 67010-2420	1/4 th	1/4 th
Gene M. Bailey, Trustee of the Gene M. Bailey Revocable Trust Dated July 29, 2008 P.O. Box 446 Neodesha, KS 66757	1/4 th	1/4 th

TRACT B: (That part of the SW/4 NW/4, Section 34, lying East of center of Dry Creek, less and except Beginning at the SE/Corner of said SW/4 NW/4, thence North 15 rods to the North Bank of the Creek, thence Westerly along said North Bank to the center of Dry Creek, thence South to the South line of the NW/4, thence East to POB):

<u>OWNERS</u>	<u>SURFACE</u>	<u>MINERALS</u>
Terry L. Harris	All	All

TRACT C: (SE/4 NW/4 and SW/4 NE/4, Section 34, less beginning at the SW/Corner of the SE/4 NW/4, thence North 20 rods, thence Southeasterly to the center of Section, thence West to POB):

<u>OWNERS</u>	<u>SURFACE</u>	<u>MINERALS</u>
Trustees of the Norma J. Hare Revocable Trust Agreement Dated September 29, 2010	All	All, but see NOTE below

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 # 3830
Name: AX&P, Inc
Address 1: P.O. Box 1176
Address 2: _____
City: Independence State: KS Zip: 67301 + _____
Contact Person: J J Hanke
Phone: (620) 331-0144 Fax: (620) 325-3616
Email Address: cge@terraworld.net

Well Location:
_____ SE NE Sec. 33 Twp. 30 S. R. 16 ☒ East ☐ West
County: Wilson
Lease Name: Casebeer Well #: 45GE
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

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Surface Owner Information:

Name: Bailey Trust
Address 1: _____
Address 2: P.O. Box 446
City: Neodesha State: KS Zip: 66757 + _____

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: 9/24/15 Signature of Operator or Agent: [Signature] Title: POS