Kansas Corporation Commission Oil & Gas Conservation Division

100115_Becker_1.pdf

1.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:	omittea with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 10/1/2015			
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 144446			
Gas Gathering System:	Lease Name: BECKER #1			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease: Sec 31-16-5 E			
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County: MORRIS			
Number of Injection Wells **	Production Zone(s): MISSISSIPPIAN			
Field Name: LOST SPRINGS				
** 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 Of Drilling			
Past Operator's License No. 35179√	Contact Person: James W. Osborn			
Past Operator's Name & Address: HEYCO DEVELOPMENT CORP	Phone:214-720-4484			
2911 TUTTLE CRK BLVD., #250, DALLAS, TX 75219	117 15 15			
	Date: 10-(3-13			
Title:Operator	Signature: W. Oshow KCC WICH!			
New Operator's License No	Contact Person:TERRY P BANDY			
New Operator's Name & Address: TERRY P BANDY DBA TE-PE	Phone: 620-628-4428 RECEIVE			
OIL & GAS, P.O. BOX 522, CANTON, KS 67428	Oil / Gas Purchaser: MACLASKEY OIL SERVICE			
	Date: 10-12-2015			
Title: OWNER/OPERATOR				
	Signature: Jerry L. Sandy			
Acknowledgment of Transfer: The above request for transfer of injection	n authorization, surface pit permit # has been			
noted, approved and duly recorded in the records of the Kansas Corporation	n 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	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:				
. Hospitalia action.	permitted by No.:			
Date:	Date:			
Authorized Signature	Authorized Signature			
DISTRICT 2 11-5-15 EPR 11-19-15	PRODUCTION 11. 20.15 UIC 11-20-15			
Mail to: Past Operator New Opera				

Side Two

Must Be Filed For All Wells

KDOR Lease	No.:	144446			
* Lease Name:	BECKER #1		* Location:	SEC 31-16S-05E, MOR	RIS COUNTY, 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	15-127-20589 🗸	4970 FSL/FNL	3901 Circle	OIL	PROD.
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL _	KCC W	ICHITA
		FSL/FNL	FEL/FWL	OCT 2	1 2015
		FSL/FNL	FEL/FWL	REC	EIVED
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

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.

OREDATOR: License # 5920	
OPERATOR: License #5920 Name: TERRY P BANDY DBA TE-PE OIL & GAS	Well Location:
Name: P.O. BOX 522	<u>JN2 _NW Sec. 31 _Twp. 16 _S. R. 05 _X East _ West</u>
	County: MORRIS
Address 2: City: CANTON State: KS Zip: 67428 + 0522	Lease Name: BECKER Well #: 1
Contact Passes TERRY P BANDY	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Contact Person: TERRY P BANDY Phone: (620) 628-4428 Fax: (620) 628-4429	
Email Address: tpbandy@sbcglobal.net	uTA
CC WICH	
Email Address: tpbandy@sbcglobal.net **CC WICH Surface Owner Information: Name: JASON BECKER **CC WICH OCT 2 1 2	015
Surface Owner Information:	y to
Name: JASON BECKER 189 US HWV 77	VED 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.	owner information can be found in the records of the register of deeds for the
Address 2:	county, and in the real estate property tax records of the county treasurer.
State: +	
are preliminary non-binding estimates. The locations may be entered of Select one of the following:	k batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the subject well is or will be l	Act (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
	nd email address.
Noo will be required to send this information to the surface or	cknowledge that, because I have not provided this information, the vner(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
task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the I	cknowledge that, because I have not provided this information, the vner(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 KCC, which is enclosed with this form.
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task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the k f 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- hereby certify that the statements made herein are true and correct to	cknowledge that, because I have not provided this information, the vner(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 KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 will be returned.
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