KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

100115_Byer.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 ____ **
☑ Gas Lease: No. of Gas Wells 1 **
☐ 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

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

Effective Date of Transfer: 10/01/2015
KS Dept of Revenue Lease No.: 227137
Lease Name: BYER
____ - SW - NE - SE Sec. 22 Twp. 30 R. 16 ☑ E ☐ W
Legal Description of Lease: NE/4 SE/4 22-30-16E
County: WILSON
Production Zone(s): BARTLESVILLE
Injection Zone(s): BARTLESVILLE

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KCC DIST # 3
OCT 10 2015
CHANUTE, KS

Surface Pit Permit No.: 15-205-26181-0000
(API No. if Drill Pit, WO or Haul)
1650 feet from ☐ N / ☑ S Line of Section
990 feet from ☑ E / ☐ W Line of Section

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

KCC WICHITA
DEC 03 2015
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Past Operator's License No. 31941 ✓
Past Operator's Name & Address: 3 B ENERGY, INC
PO BOX 354, NEODESHA, KS 66757
Title: PRESIDENT

Contact Person: SHARON WOHLER
Phone: 620-779-0153
Date: 10/1/2015
Signature: Connie Burkhead

New Operator's License No. 35122 ✓
New Operator's Name & Address: ~~KSMS OIL, LLC~~ Lakeshore Operating LLC
~~311 W SUPERIOR ST, SUITE 217~~ 13505 S. Mur-Len Rd. Ste. 105-182
~~CHICAGO, IL 60654~~ Olathe, KS 66062
Title: President

Contact Person: WESLEY KETCHAM
Phone: 773-754-6242
Oil / Gas Purchaser: COFFEYVILLE RESOURCES
Date: October 1st 2015
Signature:

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 15-205-26181-0000 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 12-4-15 PRODUCTION 12-7-15 UIC 12-7-15
Mail to: Past Operator ____ New Operator ____ District

KCC - Conservation Division, 266 N Main St, Ste 220, Wichita, KS 67202-1513

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KCC DIST # 3
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CHANUTE, KS

Side Two

Must Be Filed For All Wells

KDOR Lease No.: 227137

* Lease Name: BYER

* Location: SEC 22 TWN 30 RNG 16E

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	15-205-26181-0000 ✓	1650 Circle [✓ FSL]/FNL	990 Circle [✓ FEL]/FWL	GAS	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		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

KCC WICHITA
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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
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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 # 31941
Name: 3 B ENERGY, INC
Address 1: PO BOX 354
Address 2: 315 MILL ST
City: NEODESHA State: KS Zip: 66757 + ____
Contact Person: SHARON WOHLER
Phone: (620) 779-0153 Fax: (___) ____
Email Address: skw6972go@gmail.com

Well Location:
___ SW - NE - SE Sec. 22 Twp. 30 S. R. 16 ☒ East ☐ West
County: WILSON
Lease Name: BYER Well #: 1

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

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KCC DIST # 3
OCT 10 2015
CHANUTE, KS

KCC WICHITA
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Surface Owner Information:
Name: CASH BAKER
Address 1: 3494 SALINE RD
Address 2: ____
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: 10/1/2015 Signature of Operator or Agent: Connie Burkhead Title: PRESIDENT