080116_Block INJ.pdf

District/

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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 Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 221586, 224388, 219945 Gas Gathering System: Lease Name: BLOCK (ALL) Sallwater Disposal Well - Permit No.: Sec. 20/29 Twp. 338 R. 16 ___ feet from Legal Description of Lease: 20/29-33S-16E _____ feet from ___ E / __ W Line Enhanced Recovery Project Permit No.: Entire Project; Yes No Number of Injection Wells Production Zone(s) Field Name: Injection Zone(s): ** Side Two Must Be Completed. Surface Pit Permit No.: feet from S Line of Section (API No. if Drill Pit, WO or Haul) feet from W Line of Section Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling Kd Past Operator's License No. 34027 VICKIE HARTER Contact Person: Past Operator's Name & Address: CEP MID-CONTINENT LLC Phone: 918-877-2923 TRATION COMMISSION P. O. BOX 970 SKIATOOK, OK 74070 Date: _ Title: CHIEF OPERATING OFFICER Signature: _ CONSERVATION DIVISION WICHITA KS Contact Person: A. BLAINE HANKS New Operator's License No. . New Operator's Name & Address: GATEWAY RESOURCES U.S.A. INC Phone: 918-914-2212 32353 1821 S. E. ARBOR DR BARTLESVILLE, OK 74006 RECEIVED PRESIDENT Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #_ 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 _ 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.: 1-28,285 . Recommended action: No.E permitted by No .: _ Date: Authorized Signature Authorized Signature

DISTRICT

Mail to: Past Operator

Must Be Filed For All Wells

KDOR Lease No.: 221586, 224388, 219945 224855

Lease Name: BLOCK (ALL)

* Lease Name: BLOCK (ALL)

* Location: 20/29-33S-16E

Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1 SEC 29	15-125-30436-0000 🗸	5080 FSLYFNL	2970 FEL FWL	SWD (28285)	ACTIVE
11-20 SEC 20	15-125-29918-0000 🗸	1980 FSLYFNL	3300 FELFWL	GAS	INACTIVE
12-20 SEC 20	15-125-29919-0000	2310 FSL) FNL	4950 FEL FWL	GAS	ACTIVE
14-20 SEC 20	15-125-30428-0001 V	500 FSDFNL	3700 FEIVEWL	GAS	INACTIVE
3-29 SEC 29	15-125-30226-0000	4455 FSL) FNL	3135 FELYFWL	GAS	ACTIVE
4-29 SEC 29	15-125-29839-0000	4620(FSL)FNL	4620 (FEL)FWL	GAS	INACTIVE
		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		Received - KANSAS CORPORATION COMMISSION
		FSL/FNL	FEL/FWL		AUG 2 2 2016
		FSL/FNL	FEL/FWL	*	CONSERVATION DIVISION WIGHITA, KS
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	K	CC WICHITA
		FSL/FNL	FEL/FWL		AUG 0 3 2016
		FSL/FNL	FEL/FWL		RECEIVED
		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.

Name: CEP MID CONTINENT LLC Address 1: P. O. BOX 970 County: MONTGOMERY Address 2: Lease Name: BLOCK Contact Person: VICKIE HARTER Phone: (918) 877-2923 Fax: (918-877) 2921 Email Address: VICKIE.HARTER@CEPLLC.COM Surface Owner Information: Name: RICHARD AND JOY BARTA Address 1: 3759 S 4150 ST Address 2: Address 2: Address 2: Address 2: Address 2: Address 3: After a county, and in the real estate property tax records of the county treasurer. Surface Owner Information: Address 3: After a 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.	OPERATOR: License # 34027		Well Location:	
Address 1: P. O. BOX 970 Address 2: Lease Name: BLOCK Well #: ALL City: SKIATOOK State: OK Zip: 74070 # If filing a Form T-1 for multiple walls on a lease, enter the logal description on the lease below: 20/29-335-16E Surface Owner Information: Name: RICHARD AND JOY BARTA Address 2: Address 2: Address 3: 3759 S 4150 ST Address 2: Address 3: 3759 S 4150 ST Address 2: Address 3: 3759 S 4150 ST 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: X 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 CB-1, Fo	Name: CEP MID CONTINENT LLC			Two 33 S B 16 V Foot West
Address 2: City: SKIATOOK State: OK Zip: 74070 + If Itiling a Form T-1 for multiple wells on a lease, enter the logal description of the lease below: 20/29-33S-16E Surface Owner Information: Name: RICHARD AND JOY BARTA Address 1: Single Owner Information: Name: RICHARD AND JOY BARTA Address 2: City: INDEPENDENCE State: KS Zip: 67301 + If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owner in 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 on a 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 1 am filling in connection with this form; 2) if the form being filled is a Form C-1 or Form CB-1, Form T-1, or Form CP-1 that 1 am filling in connection with this 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(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 ty 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. I 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 orm and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned. Selection of the following: Selection of the following to the sociation of this form and that I am being charged a		* v.t. u	County: MONTGOMERY	Twp Vest
Critical Person: VICKIE HARTER Contact Person: VICKIE HARTER 2021 Fhone: (918) 877-2923 Fax: (918-97) 2921 Fax: (918-97)	Address 2:		Lease Name: BLOCK	Well #: ALL
Address 2:	City: SKIATOOK State: OK Contact Person: VICKIE HARTER Phone: (918) 877-2923 Fax: (Email Address: VICKIE.HARTER@CEP	2ip: 74070 + 918-877) 2921 LLC.COM	If filing a Form T-1 for multiple we the lease below: 20/29-33S-16E	lls on a lease, enter the legal description of
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 filling in connection with this form; 2) if the form being filled 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. Second option of the Signature of Operator or Agent:	Address 2:		When filing a Form T-1 involving m sheet listing all of the information owner information can be found in county, and in the real estate prope	nultiple surface owners, attach an additional to the left for each surface owner. Surface the records of the register of deeds for the erty tax records of the county treasurer.
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. Thereby certify that the statements made herein are true and correct to the best of my knowledge and belief. SR. REG. AFF. SPEC. Signature of Operator or Agent: SR. REG. AFF. SPEC. Title: SR. REG. AFF. SPEC. Received RANSAS CORPORATION COMMISSION.	are preliminary non-binding estimates. The Select one of the following: I certify that, pursuant to the Kans owner(s) of the land upon which the	e locations may be entered on as Surface Owner Notice Ad e subject well is or will be lo	the Form C-1 plat, Form CB-1 plates et (House Bill 2032), I have provided the form C-1,	t, or a separate plat may be submitted. led the following to the surface Form CB-1, Form T-1, or Form
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. Thereby certify that the statements made herein are true and correct to the best of my knowledge and belief. Title: SR. REG. AFF. SPEC. Received Title: Received Title: Received Title: Received				B-1, the plat(s) required by this
f 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. Thereby certify that the statements made herein are true and correct to the best of my knowledge and belief. T-18-2016 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 will be returned. 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 will be returned.	KCC will be required to send this in task, I acknowledge that I must prothat I am being charged a \$30.00 h	nformation to the surface own vide the name and address of the surface of the sur	ner(s). To mitigate the additional of of the surface owner by filling out t	ost of the KCC performing this the top section of this form and
7-18-2016 Date: Signature of Operator or Agent:	f choosing the second option, submit payn			received with this form, the KSONA-1
7-18-2016 Date: Signature of Operator or Agent:	hereby certify that the statements made he	erein are true and correct to t	he best of my knowledge and belie	ef.
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