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:	nitted with this form.
X Oil Lease: No. of Oil Wells **	Effective Date of Transfer: 8/1/16
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.:135536/222844
Gas Gathering System:	Lease Name: Painter "18"
Saltwater Disposal Well - Permit No.:	C SW NW Sec. 18 Twp. 34S R. 26 EXW
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease: All of Sec 18 T34S R26W, Meade Co., KS
Enhanced Recovery Project Permit No.:	All of Sec 10 1345 R26W, Meade Co., RS
Entire Project:YesNo	County:Meade
Number of Injection Wells **	Production Zone(s): Marmaton & Chester
Field Name: McKinney	Injection Zone(s):
** Side Two Must Be Completed.	
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section
Type of Pit: Emergency Burn Settling	feet from E / W Line of Section Haul-Off Workover Prilling
Past Operator's License No32459 🗸	0.
	Contact Person: Monty Whetstone Received Phone: (903) 561-2900 KANSAS CORPORATION COMMISSION
Past Operator's Name & Address: Mewbourne Oil Company	Tione.
P. O. Box 7698, Tyler, TX 75711	Date: 7/26/16// AUG 0 2 2016
Title: Vice-President of Operations	Signature: Conservation Division Wichita, Ks
New Operator's License No. 34318	France Discharged
PPPPVCO II C	Contact Person: Emma Richmond
New Operator's Name & Address:	Phone:(316) 265-3311
2020 N. Bramblewood	Oil/Gas Purchaser: Central Crude/ONEOK Field Service
Wichita, KS 67206	Date:
itle: Manager of Production Administration	Signature: Cula Killierand
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been
	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the a	
is acknowledged as	——————————————————————————————————————
he 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.:
late:	Date
Authorized Signature	Date:
DISTRICT EPR _ 9-16-16 _ F	PRODUCTION 91916 USEP 19 2016
Mail to: Past Operator New Operato	

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 135536/222844				
* Lease Name:	Painter "18"		* Location: C	SW NW Sec 18 T34S	R26W, Meade Co.
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	/	3344 FSL Circle	4589 FEL -	Lse insp. Dist. 1	
	15-119-21016-0002	1980 FSL FNL	660 FELFWL	OIL	PROD
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		-
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
400		FSL/FNL	FEL/FWL		1
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· · · · · · · · · · · · · · ·		FSL/FNL _	FEL/FWL _	KANS	Received SAS CORPORATION COMMISSION
		FSL/FNL	FEL/FWL		AUG 0 2 2016
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION WIGHTA KS
		FSL/FNL	FEL/FWL _		
		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.

34318			
OPERATOR: License # 34318	Well Location:		
Name: Berexco LLC Address 1: 2020 N. Bramblewood			
Address 1: 2020 N. Bramblewood	County: Meade		
Address 2:	Lease Name: Painter "18" Well #: 1		
City: Wichita State: KS Zip: 67206 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Contact Person: Evan Mayhew			
Phone: (316) 265-3311 Fax: (316) 681-4747	MOIES		
Phone: (316) 265-3311 Fax: (316) 681-4747 Email Address: emayhew@berexco.com Received (2000) R	MNO.		
Surface Owner Information: William J. and Many P. Painter Trust	Ap-		
Surface Owner Information: Name: William J. and Mary P. Painter Trust Address 1: P.O. Box 841	DIVISION .		
Name: William J. and Mary P. Painter Trust	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: P.O. Box 841	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		
Address 2:	county, and in the real estate property tax records of the county treasurer.		
City: Meade State: KS Zip: 67864 +			
the KCC with a plat showing the predicted locations of lease roads, tank 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 n 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 lo	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 and email address.		
KCC will be required to send this information to the surface ow	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 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-	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.		
August 1, 2016 Date: Signature of Operator or Agent:	Engineer Title:		