

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

022017_Rourk.pdf

Form 7-4
July 2004

REQUEST FOR CHANGE OF OPERATION
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 2 **
☐ 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: _____

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

Effective Date of Transfer: 20 2-21-2017

KS Dept of Revenue Lease No.: 114984 KR

Lease Name: Rourk

_____ Sec. 29 Twp. 24S R. 18 ☒ E ☐ W

Legal Description of Lease: The west half of the southeast quarter of Section 29 South, Range Eighteen East of the 6th PM described on attached:

County: Allen

Production Zone(s): _____

Injection Zone(s): _____

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

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

Past Operator's License No. 30838 ✓

Past Operator's Name & Address: Delma Rourk (Deceased)
920 US Hwy 54 Iola, KS 66749

Title: Operator

Contact Person: Debra Rourk

Phone: 620-365-7576

Date: 3-17-2017

Signature: Delma Rourk

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MAR 20 2017

CONSERVATION DIVISION
WICHITA, KS

New Operator's License No. 35437 ✓

New Operator's Name & Address: Debra Rourk
920 US Hwy 54
Iola, KS 66749

Title: Operator

Contact Person: Debra Rourk

Phone: 620-365-7576

Oil / Gas Purchaser: McClaskey Oil Services, Inc

Date: 3-17-2017

Signature: Debra Rourk

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 3/29/17

Mail to: Past Operator _____

New Operator _____

PRODUCTION

MAR 30 2017

MAR 30 2017

District _____

* Location: Allen County

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MAR 20 2017
CONSERVATION DIVISION
WICHITA, KS

* 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

**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 # 35437
Name: Debra K Rourk
Address 1: 920 US Hwy 54
Address 2: _____
City: Iola State: KS Zip: 66749 + 4116
Contact Person: Debra Rourk
Phone: (620-) 365-7576 Fax: (_____) _____
Email Address: debbierourk@yahoo.com

Well Location:
_____ Sec. 29 Twp. 24 S. R. 18 ☒ East ☐ West
County: Allen
Lease Name: Rourk Well #: 2

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

See Attached

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MAR 20 2017

Surface Owner Information:

Name: Debra Rourk
Address 1: 920 US Hwy 54
Address 2: _____
City: Iola State: KS Zip: 66749 + 4116

CONSERVATION DIVISION
WICHITA, KS

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: 3.18.2017 Signature of Operator or Agent: Debra Rourk Title: Operator

That part of the West Half of the Southeast Quarter (W/2 SE/4) of Section Twenty-nine (29), Township Twenty-four (24) South, Range Eighteen (18) East of the 6th P.M. described as follows, to-wit: Commencing at the Southeast corner of the W/2 of the SE/4 of said Section 29, thence North along the East line of said W/2 of SE/4 1280 feet more or less to the South line of the right-of-way of the Missouri Pacific Railroad, thence West along the South line of said railroad right-of-way 510 1/2 feet, thence South parallel to the East line of said W/2 of SE/4 1280 feet more or less to the South line of said section, thence East along section line 510 1/2 feet to point of commencement.