### 030317\_Campbell.pdf

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

July 2014 Form must be Typed Form must be Signed All blanks must be Filled

Form T-1

# 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,

Check Applicable Boxes: MUST be subt	mitted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: March 1, 2017			
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 225655 / LR			
Gas Gathering System:	Lease Name: CAMPBELL			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease: NE/4 SECTION 13, T19S, R41W			
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County: GREELEY			
Number of Injection Wells **	Production Zone(s):_CHASE GROUP			
Field Name: BRADSHAW GAS AREA				
** Side Two Must Be Completed.	Injection Zone(s):			
Curda on Dit Doymit No.	feet from N / S Line of Section			
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)				
	feet from E / W Line of Section			
Type of Pit:	Haul-Off Workover Drilling KCC WICHI			
Past Operator's License No. 4894	Contact Person: BLAINE SHEPPARD MAR 2 4 2017			
Past Operator's Name & Address: HORSESHOE OPERATING, INC.	Phone: 432-683-1448 <b>RECEIVED</b>			
110 W. LOUISIANA, STE 200, MIDLAND, TX 79701	Date: 3/7/2017			
Title: MANAGER	$R \mathcal{L} = 0$			
Title: WANGER	Signature: VI			
New Operator's Licenses No. 35442	Contact Person: STEVE RACKLEY			
New Operator's License No.				
New Operator's Name & Address: PRAIRIE GAS OPERATING, LLC	Phone: 918-734-7727			
427 S. BOSTON, SUITE 520, TULSA, OK 74103	Oil / Gas Purchaser: DCP MIDSTREAM			
	Date: 3/7/2017			
Titlo: MANAGER				
Title: WARDER	Signature Juliu Pauley			
Acknowledgment of Transfer: The above request for transfer of injecti	on authorization, surface pit permit # has been			
	on Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in t				
is acknowledged a	s is acknowledged as			
the new operator and may continue to inject fluids as authorized b	y the new operator of the above named lease containing the surface pit			
Permit No.: Recommended action:	permitted by No.:			
Date:	Date:			
Authorized Signature	Authorized Signature MAR 2 8 2017 MAR 2 8 2017			
DISTRICT EPR 3/27/17	PRODUCTION MAR Z 0 ZUIT MAR Z 0 ZUIT			
Mail to: Past Operator New Operator	erator District			

#### Side Two

#### Must Be Filed For All Wells

No.: 225655				
CAMPBELL	* Location: NE/4 SECTION 13, T19S, R41W			
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
15-071-20803V	1320 Circle	1320 Circle	GAS	
	FSL/FNL	FEL/FWL		KCC WICHITA
	FSL/FNL	FEL/FWL		
	FSL/FNL	FEL/FWL		· ·
	API No. (YR DRLD/PRE '67)  15-071-20803 V	API No. (YR DRLD/PRE '67)  15-071-20803  1320 FSL/FNL  FSL/FNL	API No. (YR DRLD/PRE '67)  API No. (YR DRLD/PRE '67)  1320	API No.

A separate sheet may be attached if necessary

<sup>\*</sup> 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.

Select the corresponding form being filed: C-1 (Intent) CB-1 (C	athodic Protection Borehole Intent) 🗵 T-1 (Transf	er) CP-1 (Plugging Application)	
OPERATOR: License # 35442			
PRAIRIE GAS OPERATING LLC	Well Location:		
Name: PRAIRIE GAS OPERATING, LLC Address 1: 427 S. Boston Ave, Suite 520	NE Sec. 13 Twp. 19 S. R. 41 East West		
Address 2:	Lacas Name. CAMPBELL	" 2-13	
City: Tulsa State: OK Zip: 74103 +	County: Greeley  Lease Name: CAMPBELL Well #: 2-13  If filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below:		
Contact Person: Steve Rackley			
Contact Person: Steve Rackley  Phone: ( 918 ) 734-7727 Fax: ( 918 ) 398-6002			
Email Address: srackley@pge-llc.com	KCC WICHITA		
		MAR 2 4 2017	
Surface Owner Information:		RECEIVED	
Name: EDMAN TRUST	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.		
Address 1: 1411 EAST 1ST ST			
Address 2:			
City: TUSTIN State: CA Zip: 92780 +			
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:	patteries, pipelines, and electrical lines. I the Form C-1 plat, Form CB-1 plat, or a s	ne locations snown on the plat eparate plat may be submitted.	
I certify that, pursuant to the Kansas Surface Owner Notice Ac owner(s) of the land upon which the subject well is or will be loc CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and	ated: 1) a copy of the Form C-1, Form ( sing filed is a Form C-1 or Form CB-1, th	CB-1. Form T-1. or Form	
□ I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KC	er(s). To mitigate the additional cost of the surface owner by filling out the top	the KCC performing this	
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-1	ee with this form. If the fee is not receive will be returned.	ed with this form, the KSONA-1	
I hereby certify that the statements made herein are true and correct to the Date: 3/14/17 Signature of Operator or Agent		PANALEN	