### Kansas Corporation Commission Oil & Gas Conservation Division

030317\_Hill.pdf

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: MUST be subm	itted 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.: 222783 VKR		
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:	Lease Name: HILL		
Spot Location: feet from N / S Line	<u>SW _ SE Sec. 10 Twp. 22 R. 40 EV W</u>		
feet from E / W Line	Legal Description of Lease: SE/4 SECTION 10 & SW/4 SECTION 11,		
Enhanced Recovery Project Permit No.:	T22S, R40W		
Entire Project: Yes No	County: HAMILTON		
Number of Injection Wells**	Production Zone(s): CHASE GROUP		
Field Name: BRADSHAW GAS AREA			
** Side Two Must Be Completed.	Injection Zone(s):		
Olde The must be completed.	KCC WICHITA		
Surface Pit Permit No.:	feet from N/SLiMARe2i4 2017		
(API No. if Drill Pit, WO or Haul)	feet from F / W Line Pri Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling		
Past Operator's License No. 4894 /	Contact Person: BLAINE SHEPPARD		
Past Operator's Name & Address: HORSESHOE OPERATING, INC.	Phone: 432-683-1448		
110 W. LOUISIANA, STE 200, MIDLAND, TX 79701	Date: 3/7/2017		
Title: MANAGER	$\mathcal{V} \mathcal{V}_0 \longrightarrow \mathcal{V} \mathcal{V}$		
	Signature: D. Please		
New Operator's License No	Contact Person: STEVE RACKLEY		
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		
Title: MANAGER	Signature: The Kalley		
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			
CPRIST.			
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.: Recommended action:	permitted by No.:		
Date	Date		
Date: Authorized Signature, ,	Date:		
DISTRICT EPR _4/11/17	PRODUCTION APR 12 2017 UIC 4-12-17		
Mail to: Past Operator New Opera			

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease	No.: 222783				
* Lease Name:	HILL	* Location: SE/4 SECTION 10 & SW/4 SECTION 11,			
Well No. API No. (YR DRLD/PRE '67)		T22 Footage from Section Line (i.e. FSL = Feet from South Line)		S, R40W Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-075-20699 🗸	660 Circle	1980 Circle	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		KCC WICHITA
		FSL/FNL	FEL/FWL		MAR 2 4 2017
		FSL/FNL	FEL/FWL		RECEIVED
		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		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

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.

	Well Location:		
Name: PRAIRIE GAS OPERATING, LLC	SW_SE_Sec. 10 Twp. 22 S. R. 40 East X West		
OPERATOR: License # 35442  Name: PRAIRIE GAS OPERATING, LLC  Address 1: 427 S. Boston Ave, Suite 520	County: HAMILTON		
Address 2:	County: HAMILTON  Lease Name: HILL Well #: 1		
City: Tulsa State: OK Zip: 74103 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: Steve Rackley	the lease below:		
Contact Person: Steve Rackley  Phone: ( 918 ) 734-7727 Fax: ( 918 ) 398-6002	KCC WICHITA		
Email Address: srackley@pge-llc.com	MAR 2 4 2017		
Surface Owner Information:	RECEIVED		
Name: PAM HILL TRUST Address 1: 5731 CIMARRON MANOR	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: 5731 CIMARRON MANOR			
Address 2:			
City: GUTHRIE State: OK Zip: 73044 +			
are preliminary non-binding estimates. The locations may be entered on Select one of the following:	the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
CP-1 that I am filing in connection with this form; 2) if the form b form; and 3) my operator name, address, phone number, fax, an  I have not provided this information to the surface owner(s). I acked this information to the surface owner owner owner owner owner owner owner owner.	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this id email address.  knowledge that, because I have not provided this information, the ner(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		
owner(s) of the land upon which the subject well is or will be lo CP-1 that I am filing in connection with this form; 2) if the form b form; and 3) my operator name, address, phone number, fax, and 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 that I am being charged a \$30.00 handling fee, payable to the Kritical surface.	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this id email address.  knowledge that, because I have not provided this information, the ner(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 CC, which is enclosed with this form.  See with this form. If the fee is not received with this form, the KSONA-1		