### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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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:	T be submitted 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.: 222360 / LR
Gas Gathering System:	Lease Name: MUNCIE
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S I	lina .
feet from DE / WI	
Enhanced Recovery Project Permit No.:	SE/4 SECTION 33, T23S, 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): KCC WICHITA
	feet from MAR, 2 4 2017
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	
Type of Pit: Emergency Burn Settling	Tradi-on Twomores Diming
Past Operator's License No. 4894	Contact Person:BLAINE SHEPPARD
Past Operator's Name & Address:HORSESHOE OPERATING	
110 W. LOUISIANA, STE 200, MIDLAND, TX 7970	
Title: MANAGER	Signature: 2. Si
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
Title: MANAGER	Signature: Salar Kelly
Acknowledgment of Transfer: The above request for transfer	of injection authorization, surface pit permit # has been
	Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership int	
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is acknowl	ledged as is acknowledged as
the new operator and may continue to inject fluids as author	orized by 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  7 PRODUCTION APR 12 2017 UIC 4-12-17
DISTRICT EPR	111000011011
Mail to: Past Operator	New Operator District

#### Side Two

#### Must Be Filed For All Wells

No.: 222360					
Lease Name: MUNCIE			*Location: NW/4 SECTION 8, T23S, R40W		
			4 SECTION 33, T23S, R4	·0W	
			Type of Well (Oil/Gas/INJ/WSW)		
15-075-20667 🗸	Circle FSL/FNL	1320 Circle	GAS	PROD	
	FSL/FNL	FEL/FWL			
<del></del>	FSL/FNL	FEL/FWL			
	FSL/FNL	FEL/FWL		-	
	FSL/FNL	FEL/FWL		-	
	FSL/FNL	FEL/FWL			
	FSL/FNL	FEL/FWL			
	FSL/FNL	FEL/FWL		WICHITA	
	FSL/FNL	FEL/FWL		2 4 2017	
	FSL/FNL	FEL/FWL	KE	CEIVED	
	FSL/FNL	FEL/FWL			
	FSL/FNL	FEL/FWL			
-	FSL/FNL	FEL/FWL			
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	FSL/FNL	FEL/FWL			
	API No. (YR DRLD/PRE '67)  15-075-20667	### API No. (YR DRLD/PRE '67)  15-075-20667  1320    FSL/FNL	MUNCIE  API No. (YR DRLD/PRE '67)  15-075-20667  1320  FSL/FNL  FSL/FNL  FEL/FWL  FSL/FNL  FSL/FNL	MUNCIE  * Location: NW/4 SECTION 8, T23S, F4 SE/4 SECTION 33, T23S, R4 SE/4 SECTION 33, T23S, R4 Type of Well (Oil/Gas/INJ/WSW)  15-075-20667  1320	

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.

OPERATOR: License # 35442	Well Location:		
Name: PRAIRIE GAS OPERATING, LLC		p. 23 S. R. 40 East <b>X</b> West	
Address 1: 427 S. Boston Ave, Suite 520	County: HAMILTON		
Address 2:	MUNCIE	Well #: 1	
City: Tulsa State: OK Zio: 74103	If filing a Form T-1 for multiple wells on a lease enter the legal description the lease below:		
Contact Person: Steve Rackley	the lease below:	KCC WICHITA	
Contact Person: Steve Rackley Phone: ( 918 ) 734-7727 Fax: ( 918 ) 398-6002 Email Address: srackley@pge-llc.com	MAR 2 4 2017		
Email Address: srackley@pge-llc.com			
		RECEIVED	
Surface Owner Information:			
Name: LAWRENCE JOSEPH DOYLE, JR	When filing a Form T-1 involving mul	tiple surface owners, attach an additional	
Address 1: 11813 W. 800TH S.	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: REDKEY State: IN Zip: 47373 +			
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax,  I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I must provide the name and address.	Act (House Bill 2032), I have provide elocated: 1) a copy of the Form C-1, Form being filed is a Form C-1 or Form CB and email address.  acknowledge that, because I have not owner(s). To mitigate the additional cost of the surface owner by filling out the	d the following to the surface form CB-1, Form T-1, or Form i-1, the plat(s) required by this provided this information, the set of the KCC performing this is top section of this form and	
that I am being charged a \$30.00 handling fee, payable to the			
		eceived with this form, the KSONA-1	