KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

010117_Bear.pdf

July 2014
Form must be Typed
Form must be Signed
All blashs 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: January 1, 2017 Oil Lease: No. of Oil Wells Effective Date of Transfer: KS Dept of Revenue Lease No.: 211525 113474 Gas Lease: No. of Gas Wells Gas Gathering System: Lease Name: Bear Saltwater Disposal Well - Permit No.: _ Sec. 20 Twp. 31 R. S Line _ feet from | N / Spot Location: _ Legal Description of Lease: E/2 NW/4 & NE/4 Sec 20-T31S-R8W feet from E / W Line Enhanced Recovery Project Permit No.: _ County: Harper Entire Project: Yes No Number of Injection Wells, Mississippi Production Zone(s): Field Name: Spivey-Grabs Injection Zone(s):_ ** Side Two Must Be Completed. N / S Line of Section feet from Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) E / W Line of Section feet from Workover Drilling Settling Haul-Off Burn Type of Pit: Emergency KCC WICHITA John Kelley 32433 / Contact Person: Past Operator's License No. _ Phone: 316-262-3413 Onshore, L.L.C. APR 2 6 2017 Past Operator's Name & Address: 11126 W. 21st St. N., Wichita, KS 67205-1846 RECEIVED Title: Manager Signature: Contact Person: Randy Newberry New Operator's License No. New Operator's Name & Address: N-10 Exploration, LLC Phone: 620-254-7251 Oil / Gas Purchaser: Pioneer Exploration, Houston, TX 77090 P. O. Box 195 Attica, KS 67009 Manager Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #_ 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 is acknowledged as the new operator of the above named lease containing the surface pit the new operator and may continue to inject fluids as authorized by permitted by No.: __ . Recommended action: Date: Authorized Signature Authorized Signature PRODUCTION DISTRICT -District **New Operator** Mail to: Past Operator _

Side Two

Must Be Filed For All Wells

| KDOR Lease | e No.: 211525 | 34.14 | | | |
|--------------|------------------------------|---|--------------|-----------------------------------|---------------------------------------|
| * Lease Name | Bear | | * Location: | | |
| 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) |
| 2 | 15-077-20914-0000 | 2310 Circle S | 1980 Circle | Gas | Prod. |
| 3 | 15-077-21036-0000 | 2970 FSLFNL | 330 (FEL)FWL | Gas | Prod. |
| | | FSL/FNL | FEL/FWL | | |
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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.

| Select the corresponding form being filed: C-1 (Intent) CB- | -1 (Cathodic Protection Borehole Intent) X T-1 (Tra | ansfer) CP-1 (Plugging Application) | |
|--|---|---|--|
| OPERATOR: License #_34352 | _ Well Location: | | |
| Name: N-10 Exploration, LLC Address 1: 124 N. Main | | | |
| Address 1: 124 N. Main | County: Harper | Strain Teast West | |
| Address 2: P. O. Box 195 | Lease Name: Bear | Well #· | |
| City: Attica State: KS Zip: 67009 + | If filling a Form T.1 for multiple walls on a loose contact the local decardation | | |
| Contact Person: Randy Newberry Phone: (620) 254-7251 Fax: (620) 254-7281 | E/2 NW/4 & NE/4 Sec 20- | E/2 NW/4 & NE/4 Sec 20-T31S-R8W | |
| Email Address: rboil@sctelcom.net | KCC WICHITA | | |
| Email Address: 1551165555555555 | · · · · · · · · · · · · · · · · · · · | APR 2 6 2017 | |
| Surface Owner Information: | | RECEIVED | |
| Name: Timothy Gammilt Address 1: 468 Tenney Drive | 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: 468 Tenney Drive | | | |
| Address 2: | | | |
| City: Rouge River State: OR Zip: 97537 + If this form is being submitted with a Form C-1 (Intent) or CB-1 (Catt | hodic Protection Borehole Intent), you mu | st supply the surface owners and | |
| the KCC with a plat showing the predicted locations of lease roads, ta are preliminary non-binding estimates. The locations may be entered | ank batteries, pipelines, and electrical lines d on the Form C-1 plat, Form CB-1 plat, or a | s. The locations shown on the plat a separate plat may be submitted. | |
| 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, | e located: 1) a copy of the Form C-1, Form being filed is a Form C-1 or Form CB-1, | n CB-1, Form T-1, or Form | |
| □ I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addre that I am being charged a \$30.00 handling fee, payable to the | owner(s). To mitigate the additional cost as of the surface owner by filling out the t | of the KCC performing this | |
| If choosing the second option, submit payment of the \$30.00 handlir form and the associated Form C-1, Form CB-1, Form T-1, or Form C | ng fee with this form. If the fee is not rece P-1 will be returned. | ived with this form, the KSONA-1 | |
| I hereby certify that the statements made herein are true and codect | to the best of my knowledge and belief. | | |
| 4-24-2 | Ma | anager | |
| Date: 4-24-20/7 Signature of Operator or Agent: | Title: | | |