100112_Mccabe_33_30.pdf

Kansas Corporation Commission OIL & Gas Conservation Division

Form T-1 March 2010 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,

Check Applicable Boxes:	ittea with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: October 1, 2012
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 229185
Gas Gathering System:	Lease Name: MCCABE
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease: T30S-R14E Sec 33: SW/4,
Enhanced Recovery Project Permit No.:	except the South 800' lying West of creek RECEIVED
Entire Project: Yes No	County: Wilson DEC 2 8 2012
Number of Injection Wells **	Production Zone(s): MULTI-ZONE
Field Name:	KCC WICHITA
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover OL Drilling
Past Operator's License No. 33365/	Contact Person: Victor H. Dyal
Past Operator's Name & Address: Layne Energy Operating, LLC	Phone: 913-362-0510
1900 Shawnee Mission Parkway, Mission Woods, KS 66205	Date: December 1, 2012
Title: President	Signature: Phil Winner
New Operator's License No. 34779	Contact Person: John G. Burke
New Operator's Name & Address: LR Energy, Inc.	Phone: 214-691-5800
8150 N. Central Expressway, Suite 1605	Oil / Gas Purchaser: _Enserco Energy
Dallas, TX 75206	Date: December 1, 2012
Title: Chief Operating Officer	Signature:
Asimouslandament of Transfers. The phase removable to the street initial	
Acknowledgment of Transfer: The above request for transfer of injection	
Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation above injection well(s) or pit permit.
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:
Authorized Signature	Authorized Signature
DISTRICT EPR EPR	PRODUCTION
Mail to: Past Operator New Operato	

Must Be Filed For All Wells

		1/	
	220405	V	
KDOR Lease No.:	229100		
KIR JE LEASE NO			

* Lease Name: MCCABE		* Location: * 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)
13-33	15-205-27247	644	Circle _\S\(\mathbf{F}\)/FNL	864	Circle FEL/FWL	СМ	PROD
151.97			_FSL/FNL		FEL/FWL		
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			_ FSL/FNL	<u> </u>	FEL/FWL		RECEIVED
			_FSL/FNL		FEL/FWL	- AA-IPA-	DEC 2 8 2012
			_FSL/FNL		FEL/FWL		KCC WICHITA

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 2010
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 (Intent)	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)			
33365				
OPERATOR: License # 33365	Well Location:			
Name: License #				
	County: Wilson Lease Name: MCCABE Well #: 13-33			
Address 2:				
State: zip:+	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Contact Person: Victor H. Dyal Phone: (913) 362-0510 Fax: (913) 362-0133				
Email Address:				
Surface Owner Information: Name: PATRICIA GAIL KIMZEY	When filing a Form T-1 involving multiple surface owners, attach an additional			
Name: PATRICIA GAIL KIMZEY Address 1: 6075 CR 1950	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 2:				
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered or Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be located CP-1 that I am filling in connection with this form; 2) if the form to form; and 3) my operator name, address, phone number, fax, ar	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this end email address. Cknowledge that, because I have not provided this information, the ener(s). To mitigate the additional cost of 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	fee with this form. If the fee is not received with this form, the KSONA-1 I will be returned.			
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.			
Date: 12/1/12 Signature of Operator or Agent:)ime Title: President			

RECEIVED
DEC 2 8 2012
KCC WICHITA