

**STATE CORPORATION COMMISSION
OF THE STATE OF KANSAS**

In the matter of the failure of Prairie Gas)	Docket No. 19-CONS-3396-CPEN
Operating, LLC (“Operator”) to comply with)	
K.A.R. 82-3-104 at the Boltz #1 well in)	CONSERVATION DIVISION
Hamilton County, Kansas)	
)	License No. 35442

In the matter of the failure of Prairie Gas)	Docket No. 20-CONS-3007-CPEN
Operating, LLC (“Operator”) to comply with)	
K.A.R. 82-3-603 at the Bounds lease in Greeley)	CONSERVATION DIVISION
County, Kansas)	
)	License No. 35442

In the matter of the failure of Prairie Gas)	Docket No. 20-CONS-3018-CPEN
Operating, LLC (“Operator”) to comply with)	
K.A.R. 82-3-104 at the Beard #1 well in)	CONSERVATION DIVISION
Greeley County, Kansas)	
)	License No. 35442

PRE-FILED REBUTTAL TESTIMONY

OF

ERIC MACLAREN

On Behalf of Commission Staff

November 18, 2019

1 **Q. What is your name?**

2 A. Eric MacLaren.

3 **Q. Are you the same Eric MacLaren who submitted direct testimony in this matter on**
4 **October 7, 2019?**

5 A. Yes.

6 **Q. What is the purpose of your rebuttal testimony?**

7 A. The purpose of my testimony is to address certain statements contained in the testimony of
8 Mr. Ian Acrey that was filed on November 4, 2019.

9 **Q. On page two (2) of his testimony, Mr. Acrey seems to imply that the legal operation and**
10 **control of the subject wells is in controversy due to settlement agreements stemming**
11 **from a federal lawsuit. How do you respond?**

12 A. There is no question that Prairie Gas Operating, LLC (Prairie Gas or Operator) is the
13 responsible entity with regard to the subject wells. Prairie Gas assumed responsibility for
14 these wells by way of Request for Transfer of Operator forms submitted to the KCC on March
15 24, 2017. I have attached a copy of the forms to my rebuttal testimony as **E.M. Exhibit 9**.

16 **Q. How do you respond to Mr. Acrey's assertion that without a concession from the**
17 **Commission regarding the amount and timing for payment of the fines assessed that**
18 **Prairie Gas could face bankruptcy?**

19 A. While I can certainly empathize with an operator facing financial difficulties, financial
20 difficulties do not alleviate an operator's obligations to conduct its operations in accordance
21 with Commission rules and regulations. The violations identified in these consolidated
22 dockets pose significant environmental threats that need to be addressed. Specifically, those
23 violations include: (1) failure to properly case or seal wells that Staff has determined pose an

1 environmental threat, and (2) failure to timely clean up two spills, a situation that was not
2 remedied until June 28, 2019, several months after the first notice of violation was sent to the
3 Operator with regard to that particular issue.

4 **Q. How do you respond to Mr. Acrey's assertion that the Beard #1 was returned to**
5 **production and has not received a CP-111?**

6 A. While the well resumed pumping it only produced water. Mr. Acrey's assertion is irrelevant
7 because the penalty on this well was for K.A.R. 82-3-104, which requires an operator to
8 effectively case or seal off formations that would be damaged by the migration of
9 hydrocarbons or water. Resuming production does not bring the well into compliance with
10 this regulation.

11 **Q. How do you respond to Mr. Acrey's assertion that Prairie Gas should be given until**
12 **December 1, 2019 to either produce or MIT the Boltz well and up to 90 days to resume**
13 **production or file a new TA application on the Beard #1?**

14 A. My response is that the request is unreasonable. Time is of the essence in getting these wells
15 into compliance because they pose a threat to drinking water. Further, the assertion that a TA
16 application will resolve the compliance issues is inaccurate. To achieve compliance with
17 K.A.R. 82-3-104, Operator must demonstrate that formations which could be damaged by the
18 migration of hydrocarbons or water have been cased or sealed off. In order for the Boltz and
19 Beard wells to demonstrate casing integrity, they must each pass a casing pressure test by
20 setting a plug over the perforations and applying a minimum of 300 psi to the casing for 30
21 minutes. This must be witnessed by the KCC, and to-date it has not been done.

1 **Q. Please summarize your recommendations.**

2 A. The high fluid levels in these wells is indicative of a Glorietta casing leak. The Glorietta is a
3 highly corrosive formation and poses a serious threat of contamination of usable water. The
4 Operator needs to demonstrate casing integrity, either before filing a CP-111 or resuming
5 production.

6 **Q. Does this conclude your testimony?**

7 A. Yes.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

030317_Boltz.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:

- ☐ Oil Lease: No. of Oil Wells _____ **
- ☒ Gas Lease: No. of Gas Wells 1 **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: BRADSHAW GAS AREA

**** Side Two Must Be Completed.**

Effective Date of Transfer: March 7, 2017

KS Dept of Revenue Lease No.: 205781 *HR*

Lease Name: BOLTZ

S2 - SE - NW Sec. 1 Twp. 24 R. 41 ☐ E ☒ W

Legal Description of Lease: ALL OF SECTION 1, T24S,R41W

County: HAMILTON

Production Zone(s): CHASE GROUP

Injection Zone(s): _____

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ Drilling

Past Operator's License No. 4894

Past Operator's Name & Address: HORSESHOE OPERATING, INC.

110 W. LOUISIANA, STE 200, MIDLAND, TX 79701

Title: MANAGER

Contact Person: BLAINE SHEPPARD

Phone: 432-683-1448

Date: 3/7/2017

Signature: *[Signature]*

New Operator's License No. 35442

New Operator's Name & Address: PRAIRIE GAS OPERATING, LLC

427 S. BOSTON, SUITE 520, TULSA, OK 74103

Title: MANAGER

Contact Person: STEVE RACKLEY

Phone: 918-734-7727

Oil / Gas Purchaser: DCP MIDSTREAM

Date: 3/7/2017

Signature: *[Signature]*

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been 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
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ . Recommended action: _____

Date: _____
Authorized Signature

_____ is acknowledged as
the new operator of the above named lease containing the surface pit
permitted by No.: _____ .

Date: _____
Authorized Signature

DISTRICT _____ EPR 4/11/17 PRODUCTION APR 12 2017 UIC 412-17
Mail to: Past Operator _____ New Operator _____ District _____

KCC - Conservation Division, 266 N Main St, Ste 220, Wichita, KS 67202-1513

* Lease Name: BOLTZ

* Location: ALL OF SECTION 1, T24S,R41W

KCC WICHITA
MAR 24 2017
RECEIVED

E.M. Exhibit 9
Page 2 of 12

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1
July 2014
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35442
Name: PRAIRIE GAS OPERATING, LLC
Address 1: 427 S. Boston Ave, Suite 520
Address 2:
City: Tulsa State: OK Zip: 74103 +
Contact Person: Steve Rackley
Phone: (918) 734-7727 Fax: (918) 398-6002
Email Address: srackley@pge-llc.com

Well Location:
S2 SE NW Sec. 1 Twp. 24 S. R. 41 ☐ East ☒ West
County: HAMILTON
Lease Name: BOLTZ
Well #: 1
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

KCC WICHITA
MAR 24 2017
RECEIVED

Surface Owner Information:

Name: MAURINE URTON
Address 1: PO BOX 86
Address 2:
City: SYRACUSE State: KS Zip: 67878 +

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.

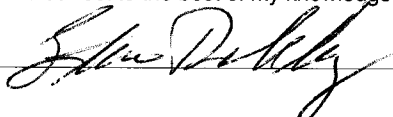
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 3/17/17 Signature of Operator or Agent:  Title: MGR

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:

- ☐ Oil Lease: No. of Oil Wells _____ **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☒ Saltwater Disposal Well - Permit No.: D18286.0 ✓
- Spot Location: 135 feet from ☐ N / ☒ S Line
- 5198 feet from ☒ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: BRADSHAW GAS AREA ✓

**** Side Two Must Be Completed.**

Effective Date of Transfer: March 7, 2017

KS Dept of Revenue Lease No.: NA ✓

Lease Name: BOUNDS 2 SWD ✓

SW SW SW Sec. 13 Twp. 20 R. 40 ☐ E ☒ W

Legal Description of Lease: SW4 SECTION 13, T20S, R40W ✓

County: GREELEY ✓

Production Zone(s): CHASE GROUP

Injection Zone(s): Lower Ft Riley

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

_____ feet from ☐ N / ☐ S Line of Section

_____ feet from ☐ E / ☐ W Line of Section

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☒ Drilling KL

Past Operator's License No. 4894 ✓

Past Operator's Name & Address: HORSESHOE OPERATING, INC.
110 W. LOUISIANA, STE 200, MIDLAND, TX 79701

Title: MANAGER

Contact Person: BLAINE SHEPPARD

Phone: 432-683-1448

Date: 3/7/2017

Signature: [Signature]

KCC WICHITA

MAR 24 2017

RECEIVED

New Operator's License No. 35442 ✓

New Operator's Name & Address: PRAIRIE GAS OPERATING, LLC
427 S. BOSTON, SUITE 520, TULSA, OK 74103

Title: MANAGER

Contact Person: STEVE RACKLEY

Phone: 918-734-7727

Oil / Gas Purchaser: DCP MIDSTREAM

Date: 3/7/2017

Signature: [Signature]

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been 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.

Prairie Gas Operating LLC is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: D-18.286 . Recommended action: NONE

Date: 3-28-17 Cheryl L Beyer
Authorized Signature

_____ is acknowledged as
the new operator of the above named lease containing the surface pit
permitted by No.: _____ .

Date: _____
Authorized Signature

DISTRICT _____ EPR 3/27/17 PRODUCTION MAR 28 2017 UIC 3-28-17
Mail to: Past Operator 3-28-17 New Operator 3-28-17 District ① 3-28-17

* Location: SW4 SECTION 13, T20S, R40W

KCC WICHITA
MAR 24 2017
RECEIVED

E.M. Exhibit 9
Page 5 of 12

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1
July 2014
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35442
Name: PRAIRIE GAS OPERATING, LLC
Address 1: 427 S. Boston Ave, Suite 520
Address 2: _____
City: Tulsa State: OK Zip: 74103 + _____
Contact Person: Steve Rackley
Phone: (918) 734-7727 Fax: (918) 398-6002
Email Address: srackley@pge-llc.com

Well Location:
____ SW ____ SW ____ SW Sec. 13 Twp. 20 S. R. 40 ☐ East ☒ West
County: Greeley
Lease Name: BOUNDS Well #: 2

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

KCC WICHITA
MAR 24 2017
RECEIVED

Surface Owner Information:

Name: BRENNEN B BOUNDS TRUST
Address 1: 8825 205TH PLACE SW
Address 2: _____
City: EDMONDS State: WA Zip: 98026 + _____

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.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 3/16/17 Signature of Operator or Agent: Steve Rackley Title: MANAGER

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

030317_Bearl.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**

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MUST be submitted with this form.

Check Applicable Boxes:

- ☐ Oil Lease: No. of Oil Wells _____ **
☒ Gas Lease: No. of Gas Wells 1 **
☐ Gas Gathering System: _____
☐ Saltwater Disposal Well - Permit No.: _____
Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: BRADSHAW GAS AREA

**** Side Two Must Be Completed.**

Effective Date of Transfer: March 3, 2017
KS Dept of Revenue Lease No.: 205803 *KR*
Lease Name: BEARL
SE - SE - NW - SE Sec. 36 Twp. 20 R. 41 ☐ E ☒ W
Legal Description of Lease: SE/4 SECTION 36, T20S, R41W
County: GREELEY
Production Zone(s): CHASE GROUP
Injection Zone(s): _____

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

_____ feet from ☐ N / ☐ S Line of Section
_____ feet from ☐ E / ☐ W Line of Section

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ Drilling *✓*

Past Operator's License No. 4894 ✓
Past Operator's Name & Address: HORSESHOE OPERATING, INC.
110 W. LOUISIANA, STE 200, MIDLAND, TX 79701
Title: MANAGER

Contact Person: BLAINE SHEPPARD **KCC WICHITA**
Phone: 432-683-1448
Date: 3/7/2017 **MAR 24 2017**
Signature: *[Signature]* **RECEIVED**

New Operator's License No. 35442 ✓
New Operator's Name & Address: PRAIRIE GAS OPERATING, LLC
427 S. BOSTON, SUITE 520, TULSA, OK 74103
Title: MANAGER

Contact Person: STEVE RACKLEY
Phone: 918-734-7727
Oil / Gas Purchaser: DCP MIDSTREAM
Date: 3/7/2017
Signature: *[Signature]*

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been 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
the new operator and may continue to inject fluids as authorized by
Permit No.: _____. Recommended action: _____
Date: _____
Authorized Signature: _____

_____ is acknowledged as
the new operator of the above named lease containing the surface pit
permitted by No.: _____.
Date: _____
Authorized Signature: _____

DISTRICT _____ EPR 3/27/17 PRODUCTION MAR 28 2017 UIC MAR 28 2017
Mail to: Past Operator _____ New Operator _____ District _____

* Location: SE/4 SECTION 36, T20S, R41W

[illegible]

KCC WICHITA
MAR 24 2017
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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

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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July 2014
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Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35442
Name: PRAIRIE GAS OPERATING, LLC
Address 1: 427 S. Boston Ave, Suite 520
Address 2: _____
City: Tulsa State: OK Zip: 74103 + _____
Contact Person: Steve Rackley
Phone: (918) 734-7727 Fax: (918) 398-6002
Email Address: srackley@pge-llc.com

Well Location:
SE SE NW SE Sec. 36 Twp. 20 S. R. 41 ☐ East ☒ West
County: Greeley
Lease Name: BEARD Well #: 1

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

KCC WICHITA

MAR 24 2017

RECEIVED

Surface Owner Information:

Name: KATHLEEN BURKHART
Address 1: 6711 S IVY WAY B-8
Address 2: _____
City: CENTENNIAL State: CO Zip: 80111 + _____

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.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 3/17/17 Signature of Operator or Agent: Steve Rackley Title: MANAGER

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1

July 2014

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Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35442
Name: PRAIRIE GAS OPERATING, LLC
Address 1: 427 S. Boston Ave, Suite 520
Address 2: _____
City: Tulsa State: OK Zip: 74103 + _____
Contact Person: Steve Rackley
Phone: (918) 734-7727 Fax: (918) 398-6002
Email Address: srackley@pge-llc.com

Well Location:
SE SE NW SE Sec. 36 Twp. 20 S. R. 41 ☐ East ☒ West
County: Greeley
Lease Name: BEARD Well #: 1

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

KCC WICHITA

MAR 24 2017

RECEIVED

Surface Owner Information:

Name: MAUREEN B CARR
Address 1: 10175 E FAIR CIRCLE
Address 2: _____
City: ENGLEWOOD State: CO Zip: 80111 + _____

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.

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- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 3/17/17 Signature of Operator or Agent: Steve Rackley Title: MANAGER

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1
July 2014
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35442
Name: PRAIRIE GAS OPERATING, LLC
Address 1: 427 S. Boston Ave, Suite 520
Address 2: _____
City: Tulsa State: OK Zip: 74103 + _____
Contact Person: Steve Rackley
Phone: (918) 734-7727 Fax: (918) 398-6002
Email Address: srackley@pge-llc.com

Well Location:
SE SE NW SE Sec. 36 Twp. 20 S. R. 41 ☐ East ☒ West
County: Greeley
Lease Name: BEARD Well #: 1

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

KCC WICHITA

MAR 24 2017

RECEIVED

Surface Owner Information:

Name: CHARLES E SMITH
Address 1: 433 EMERALD BAY LANE
Address 2: _____
City: LADY LUCK State: FL Zip: 31529 + _____

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.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
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Date: 3/16/17 Signature of Operator or Agent: Steve Rackley Title: Manager

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
**CERTIFICATION OF COMPLIANCE WITH THE
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July 2014
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Name: PRAIRIE GAS OPERATING, LLC
Address 1: 427 S. Boston Ave, Suite 520
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Contact Person: Steve Rackley
Phone: (918) 734-7727 Fax: (918) 398-6002
Email Address: srackley@pge-llc.com

Well Location:
SE SE NW SE Sec. 36 Twp. 20 S. R. 41 ☐ East ☒ West
County: Greeley
Lease Name: BEARD Well #: 1

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

KCC WICHITA

MAR 24 2017

RECEIVED

Surface Owner Information:

Name: THOMAS L. SMITH
Address 1: 7625 ACUFF LANE
Address 2: _____
City: LENEXA State: KS Zip: 66216 + _____

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.

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 3/16/17 Signature of Operator or Agent: [Signature] Title: MANAGER

CERTIFICATE OF SERVICE

19-CONS-3396-CPEN, 20-CONS-3007-CPEN, 20-CONS-3018-CPEN

I, the undersigned, certify that a true copy of the attached Prefiled Rebuttal Testimony of Eric MacLaren has been served to the following by means of electronic service on November 18, 2019.

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lthompson@tslawfirm.com

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/S/ Paula J. Murray

Paula J. Murray