

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form T-1
April 2004
Form must be Typed
Form must be Signed
All blanks must be Filled

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: _____

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

Effective Date of Transfer: 1/01/2007

KS Dept of Revenue Lease No.: 226191

Lease Name: Donald & Geneva Schmidt

Sec. 2 Twp. 30 R. 14 ☒ E ☐ W

Legal Description of Lease: S/2 SE/4

County: Wilson

Production Zone(s): Cherokee Basin Coals

Injection Zone(s): _____

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JAN 03 2007

CONSERVATION DIVISION
WICHITA, KS

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

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

Past Operator's License No. 33342

Past Operator's Name & Address: Blue Jay Operating, LLC
4916 Camp Bowie Blvd., Suite 204 Fort Worth, TX 76107

Title: Office Manager

Contact Person: Rhonda Wilson

Phone: (620) 378-3650

Date: 12/28/06

Signature: Rhonda Wilson

New Operator's License No. 33539

New Operator's Name & Address: Cherokee Wells LLC
4916 Camp Bowie Blvd., Suite 204
Fort Worth, TX 76107

Title: Office Manager

Contact Person: Rhonda Wilson

Phone: (620) 378-3650

Oil / Gas Purchaser: Southeastern Kansas Pipeline & Trans. Co., LLC

Date: 12/28/06

Signature: Rhonda Wilson

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WICHITA, KS

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 6-3-08 PRODUCTION JUN 04 2008 UIC 6-4-08
Mail to: Past Operator _____ New Operator _____ District _____

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

* Lease Name: Donald & Geneva Schmidt

* Location: SEC 2, TWP 30S, R 14E in Wilson County, KS

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* 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.