

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 1 \*\*
- ☐ Gas Lease: No. of Gas Wells \_\_\_\_\_ \*\*
- ☐ 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: GORHAM

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

Effective Date of Transfer: 07-06-2006

KS Dept of Revenue Lease No.: 01/985332 123628 UB

Lease Name: PATTERSON

SW - NW - NW - Sec. 36 Twp. 13S R. 15 ☐ E ☒ W

Legal Description of Lease: 36 13S 15W NW/4

County: RUSSELL

Production Zone(s): ARBUCKLE, LANSING

Injection Zone(s): \_\_\_\_\_

RECEIVED

APR 20 2009

KCC WICHITA

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. 6622 Exp. 6/30/06

Past Operator's Name & Address: JASON OIL P.O. BOX 701 RUSSELL  
KANSAS 67665

Title: OWNER/OPERATOR

Contact Person: JAMES SCHOENBERGER

Phone: 785-483-4204

Date: 04-17-2009

Signature: James Schoenberger

New Operator's License No. 33813 ✓

New Operator's Name & Address: JASON OIL LLC P.O. BOX 701  
RUSSELL KANSAS 67665

Title: OWNER/OPERATOR

Contact Person: JAMES SCHOENBERGER

Phone: 785-483-4204

Oil / Gas Purchaser: PLAINS

Date: 04-17-2009

Signature: James Schoenberger

**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 4-21-09

PRODUCTION 4/21/09

UIC 4-21-09

Mail to: Past Operator \_\_\_\_\_

New Operator \_\_\_\_\_

District \_\_\_\_\_

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

\* Location: 36 13S 15W

**KCC WICHITA**

\* 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.