

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 2 **
- ☐ 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: Medicine Lodge - Boggs

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

Effective Date of Transfer: 04012010

KS Dept of Revenue Lease No.: 105975, 204669

Lease Name: Boggs Estate

Sec. 9 Twp. 33 R. 12 ☐ E ☒ W

Legal Description of Lease: SW/4

County: Barber

Production Zone(s): Mississippi

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 *or*

Past Operator's License No. 32825

Past Operator's Name & Address: Pioneer Exploration, LLC

15603 Kuykendahl, Ste 200, Houston Tx 77090

Title: Vice-President

Contact Person: John Gilbert

Phone: 281-893-9400

Date: 04/01/2010

Signature: John Gilbert

New Operator's License No. 34357

New Operator's Name & Address: Atlas Operating LLC

15603 Kuykendahl, Ste 200, Houston, TX 77090

Title: Vice-President

Contact Person: John Gilbert

Phone: 281-893-9400

Oil / Gas Purchaser: NCRA/Oneok

Date: 04/01/2010

Signature: John Gilbert

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: _____

RECEIVED
KANSAS CORPORATION COMMISSION

DISTRICT _____ EPR 8-26-10

PRODUCTION 8/26/10

UIC AUG 26 2010

Mail to: Past Operator _____ New Operator _____ District _____

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

CONSERVATION DIVISION
WICHITA, KS

040110_Boggs_Estate.pdf

SCANNED

Side Two

Must Be Filled For All Wells

KDOR Lease No.: 105975, 204669

* Lease Name: Boggs Estate

* Location: _____

[illegible]

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.