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JUL 27 2010

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

KCC WICHITA

Form T-1  
March 2010Form must be Typed  
Form must be Signed  
All blanks must be FilledREQUEST FOR CHANGE OF OPERATOR  
TRANSFER OF INJECTION OR SURFACE PIT PERMITForm 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 3 \*\*
- ☐ Gas Lease: No. of Gas Wells \_\_\_\_\_ \*\*
- ☐ Gas Gathering System: \_\_\_\_\_
- ☒ Saltwater Disposal Well - Permit No.: D23791
- Spot Location: 990 feet from ☐ N / ☒ S Line
- 4290 feet from ☒ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: \_\_\_\_\_
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells \_\_\_\_\_ \*\*

Field Name: El Dorado**\*\* Side Two Must Be Completed.**Effective Date of Transfer: 7-15-99KS Dept of Revenue Lease No.: 122731 WLease Name: Manning ASW/4 Sec. 5 Twp. 26 R. 5 ☒ E ☐ WLegal Description of Lease: SW/4, Sec 5, 26, 5ECounty: ButlerProduction Zone(s): ArbuckleInjection Zone(s): N/ASurface Pit Permit No.: N/A  
(API No. if Drill Pit, WO or Haul)\_\_\_\_\_ feet from ☐ N / ☐ S Line of Section\_\_\_\_\_ feet from ☐ E / ☐ W Line of SectionType of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☒ Drilling OKPast Operator's License No. 3046 Exp. 7/30/99Contact Person: Michael L WattsPast Operator's Name & Address: Big Eight EnergyPhone: 316-721-505010222 W Central, Ste 201, Wichita, KS 67212Date: 7/23/10Title: PartnerSignature: Michael L WattsNew Operator's License No. 32547 ✓Contact Person: Michael L WattsNew Operator's Name & Address: Big Eight Energy, LLCPhone: 316-721-505010222 W Central, Ste 201Oil / Gas Purchaser: MacLiskey Oilfield ServicesWichita, KS 67212Date: 7/23/10Title: MemberSignature: Michael L Watts

**Acknowledgment of Transfer:** The above request for transfer of injection authorization, surface pit permit # N/A 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.

Big Eight Energy LLC is acknowledged as  
the new operator and may continue to inject fluids as authorized by  
Permit No.: D23791 Recommended action: file  
all 30's from 1997 to present  
Date: JUL 30 2010 Handwritten Signature  
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 7-28-10 PRODUCTION 8/2/10 JUL 30 2010  
Mail to: Past Operator JUL 30 2010 New Operator JUL 30 2010 District JUL 30 2010 2

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

071599\_Manning\_A\_INV.pdf

KCC WICHITA

***Must Be Filed For All Wells***

\* Location: SW/4 SEC 5, 26, 5E

*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.

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Form KSONA-1

July 2010

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KCC WICHITA  
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 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 32547  
Name: Big Eight Energy, LLC  
Address 1: 10222 W. Central  
Address 2: Suite 201  
City: Wichita State: KS Zip: 67212 + \_\_\_\_\_  
Contact Person: Michael L Watts  
Phone: ( 316 ) 721-5050 Fax: ( 316 ) 721-6329  
Email Address: \_\_\_\_\_

Well Location: \_\_\_\_\_  
\_\_\_\_\_ - \_\_\_\_\_ - SW/4 Sec. 5 Twp. 26 S. R. 5 ☒ East ☐ West  
County: Butler  
Lease Name: Manning A Well #: \_\_\_\_\_

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

SW/4, Sec 5, 26, 5E

## Surface Owner Information:

Name: Marilyn Smith  
Address 1: 761 Country Acres  
Address 2: \_\_\_\_\_  
City: Wichita State: KS Zip: 67212 + \_\_\_\_\_

*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 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: 7/23/10 Signature of Operator or Agent: [Signature] Title: Member