

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form T-1
March 2010
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: McKinney

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

Effective Date of Transfer: 06/01/10

KS Dept of Revenue Lease No.: 222775

Lease Name: Theis "B"

C NW Sec. 23 Twp. 34S R. 25 ☐ E ☒ W

Legal Description of Lease: Longitude -100.012279
Latitude 37.076139 NW/4 of 23-34-25W

County: Clark

Production Zone(s): Mississippian

Injection Zone(s): _____

060110 Theis B.pdf

Surface Pit Permit No.: 15-025-20796
(API No. if Drill Pit, WO or Haul)

1000 feet from ☐ N / ☒ S Line of Section

1320 feet from ☐ E / ☒ W Line of Section

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

Past Operator's License No. 7118✓
Seagull Operating Co., Inc.

Past Operator's Name & Address:
416 Travis St., Suite 1215 Shreveport, LA 71101

Title: President

Contact Person: Scott S. Lowe

Phone: 318-226-9170

Date: 09/17/10

Signature: SS Lowe

RECEIVED

NOV 24 2010

KCC WICHITA

New Operator's License No. 30322 30233✓

New Operator's Name & Address: Red Hills Resources

1304 West 24th Avenue
Hutchinson, KS 67502

Title: Vice President

Contact Person: Wallace McKinney

Phone: 620-669-9996

Oil / Gas Purchaser: DCP Midstream

Date: 9-22-10

Signature: Wallace McKinney

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

RECEIVED

OCT 22 2010

KCC WICHITA

RECEIVED

OCT 13 2010

KCC WICHITA

DISTRICT _____ EPR 12/16/10 PRODUCTION 12-17-10 UIC 12-17-10
Mail to: Past Operator _____ New Operator _____ District _____

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

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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

Form KSONA-1
July 2010
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 # 7118
Name: Seagull Operating Co., Inc.
Address 1: 416 Travis Street, Suite 1215
Address 2: _____
City: Shreveport State: LA Zip: 71101 + _____
Contact Person: Scott S. Lowe
Phone: (318) 226-9170 Fax: (318) 425-7957
Email Address: seagull@bellsouth.net

Well Location: _____
_____ C NW 23 34 25
_____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☒ West
County: Clark
Lease Name: Theis "B" Well #: 1
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

**KSONA FEE
PAID**

Surface Owner Information:

Name: TERRY Maphet
Address 1: Rt. 1 Box 139
Address 2: _____
City: GATE State: OK Zip: 73844 + 9600

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: 10/19/10 Signature of Operator or Agent: [Signature] Title: President

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

RECEIVED
RECEIVED OCT 22 2010
NOV 24 2010
KCC WICHITA
KCC WICHITA

Display Device : DSP39
User : DKT

KSCAMA ADM 1 CLARK COUNTY, KANSAS DKT 11/10/10
DISPLAY AA - NAME & DESC - 1 LVD= PARCEL 256-23-0-00-00-001.00-0-01
NUMBER OF SUBSIDIARY RECORDS 00
CITY/TOWNSHIP CODE ET ENGLEWOOD TWP TAX UNIT 025
ORIGINAL TAX UNIT/DIST ENGLEWOOD TW

SUBDIVISION CODE CENSUS TRACT 000000 SCHOOL DIST USD220
OLD ACCOUNT NUMBER 1: MAPHET, TERRY ET AL 2:
NAME (CONTINUED) RT 1 BOX 139 STATE OK ZIP+4 73844 - 9600
MAILING ADDRESS GATE
CITY/TOWN
CARE/OF TAXPAYER

LOT(S) BLOCK SUBDIVISION
SUBDIVISION PLAT : BOOK PAGE SECTION 23 TOWNSHIP 34 RANGE 25W
TRCT DESC 1: N2, W2 SW, SE, EX R/W 2:
3: 4:

LOT SIZE	WIDTH	DEPTH	IRREG	RETA	DEED	CALC	USED
0000 X 0000	0000	0000	0000	0000	0000	5917	0000
DEED BOOK/PAGE	0062 / 0019	0062 / 0018		/		/	

PRESS CMD KEY 7 TO EXIT PARCEL NEXT FIELD 945

RECEIVED
NOV 24 2010
KCC WICHITA