

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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.

Form T-1
March 2010
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.: E-24161
Entire Project: ☒ Yes ☐ No
Number of Injection Wells 1 **

Field Name: Peru-Sedan Oil & Gas

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

Effective Date of Transfer: March 1, 2010 5/10/10

KS Dept of Revenue Lease No.: 215457 KQR

Lease Name: Carter

Sec. 34 Twp. 33 R. 12 ☒ E ☐ W

Legal Description of Lease: S/2 NE/4, N/2 SE/4

County: Chautauqua

Production Zone(s): Redd Sandstone

Injection Zone(s): Redd Sandstone

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

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

Past Operator's License No. 34103 ✓

Past Operator's Name & Address: Lamamco Drilling Company
4444 E. 146th St. North, P.O. Box 550, Skiatook, Ok 74070

Title: Area Manager

Contact Person: Thomas H. Oast

Phone: (620) 725-3200

Date: March 1, 2010

Signature: Thomas H. Oast

New Operator's License No. 34389 ✓

New Operator's Name & Address: STL Oil & Gas, LLC
P.O. BOX 528

Skiatook, Oklahoma 74070

Title: Owner

Contact Person: Skylar Miller

Phone: (918) 520 - 4244

Oil / Gas Purchaser: Quest / Bluestem

Date: March 1, 2010

Signature: Skylar Miller

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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.

STL Oil & Gas, LLC is acknowledged as

the new operator and may continue to inject fluids as authorized by

Permit No.: E-24161 . Recommended action: NONE

Date: 3-11-11 Cheryl R. Bay

Authorized Signature

_____ is acknowledged as

the new operator of the above named lease containing the surface pit

permitted by No.: _____

Date: _____

Authorized Signature

DISTRICT 3 3-4-11 EPR 3-10-11 PRODUCTION 3-14-11 UIC 3-11-11
Mail to: Past Operator 3-11-11 New Operator 3-11-11 District 3 3-11-11

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

05/10/10 Carter INT.pdf

* Lease Name: Carter

* Location: S/2 NE/4, N/2 SE/4 Sec 34-T33S-R12E

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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.

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 # 34389
Name: STL Oil & Gas, LLC
Address 1: P.O. Box 528
Address 2: _____
City: Skiatook State: OK Zip: 74070 + _____
Contact Person: Skylar Miller
Phone: (918) 520 - 4244 Fax: (918) 396 - 1232
Email Address: _____

Well Location:
_____ Sec. 34 Twp. 33 S. R. 12 ☒ East ☐ West
County: Chautauqua
Lease Name: Carter Well #: Multiple

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

S/2 NE/4, N/2 SE/4 Section 34 - T33S - R12E

Surface Owner Information:

Name: Clavin Carter
Address 1: 1076 Road 26
Address 2: _____
City: Sedan State: KS Zip: 67361 + _____

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: 12/31/2010 Signature of Operator or Agent: [Signature] Title: Agent

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