

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

RECEIVED  
FEB 21 2011

Form T-1  
April 2004

REQUEST FOR CHANGE OF OPERATOR  
TRANSFER OF INJECTION OR SURFACE PIT PERMIT

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.: E-21,647  
Entire Project: ☒ Yes ☐ No  
Number of Injection Wells 1 \*\*

Field Name: THRALL-AAGARD

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

Effective Date of Transfer: 10/6/08  
AUGUST 15, 2008  
KS Dept of Revenue Lease No.: 102475  
Lease Name: HAWTHORNE  
19 - 24 - 10 - Sec. 19 Twp. 24 R. 10 ☒ E ☐ W  
Legal Description of Lease: NORTHWEST 1/4 OF SECTION  
19, TOWNSHIP 24, RANGE 10 EAST  
County: GREENWOOD  
Production Zone(s): BARTLESVILLE  
Injection Zone(s): BARTLESVILLE

Surface Pit Permit No.: N/A  
(API No. if Drill Pit, WO or Haul)

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

Past Operator's License No. 5370 Exp 6/30/09  
Past Operator's Name & Address: RICHARD A. SOULE  
822 E. RIVER, EUREKA, KS 67045  
Title: OWNER

Contact Person: RICHARD A. SOULE  
Phone: 620-583-7496  
Date: APRIL 27, 2009  
Signature: Richard A. Soule

New Operator's License No. 34185  
New Operator's Name & Address: Flintstone Energy  
9647 NE Cole Creek Rd  
El Dorado Ks 67042  
Title: owner

Contact Person: David Stackley  
Phone: 316-321-4615  
Oil / Gas Purchaser: McClaskey  
Date: 8-8-09  
Signature: David A. Stackley

**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.

Flintstone Energy is acknowledged as the  
new operator and may continue to inject fluids as authorized by  
Permit No. E-21,647. Recommended action: \_\_\_\_\_

Date: 3-2-11 Cheryl H. Boyer  
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 3/2/11 PRODUCTION 3-8-11 UIC 3-2-11  
Mail to: Past Operator 3-2-11 New Operator 3-2-11 District 3 3-2-11

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

100608 Hawthorne IMJ.pdf

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

KDOR Lease No.: 102475 *[Signature]*

\* Lease Name: HAWTHORNE

\* Location: SEC. 19, TWP. 24, R 10 E

[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.

KANSAS CORPORATION COMMISSION  
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**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 # 34185  
Name: Flintstone Energy  
Address 1: 9647 NE Cole Creek Rd  
Address 2: \_\_\_\_\_  
City: El Dorado State: Ks Zip: 67042 + \_\_\_\_\_  
Contact Person: David Stackley  
Phone: ( 316 ) 321-4614 Fax: ( \_\_\_\_\_ ) \_\_\_\_\_  
Email Address: davestackley@yahoo.com

Well Location:  
\_\_\_\_\_ Sec. 19 Twp. 24 S. R. 10 ☒ East ☐ West  
County: greenwood

Lease Name: Hawthorne Well #: \_\_\_\_\_  
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

NW 1/4 of 19, 24, 10 E

**Surface Owner Information:**

Name: Jerry and Mary Duesenbury  
Address 1: 1238 NW 100 Rd  
Address 2: \_\_\_\_\_  
City: Attica State: Ks Zip: 67009 + \_\_\_\_\_

*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: 2/11/11 Signature of Operator or Agent: [Signature] Title: Manager