

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 7 \*\*  
☐ 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.: \_\_\_\_\_  
Entire Project: ☐ Yes ☐ No  
Number of Injection Wells \_\_\_\_\_ \*\*  
Field Name: Paola-Rantoul

Effective Date of Transfer: June 1, 2011  
KS Dept of Revenue Lease No.: 117263 ✓  
Lease Name: Ayres  
\_\_\_\_\_ NE Sec. 19 Twp. 17 R. 23 ☒ E ☐ W  
Legal Description of Lease: NE4 of Sec. 19, Twp. 17, R 23E  
County: Miami  
Production Zone(s): Bartlesville  
Injection Zone(s): Bartlesville

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

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

\_\_\_\_\_ feet from ☐ N / ☐ S Line of Section  
\_\_\_\_\_ feet from ☐ E / ☐ W Line of Section

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

Past Operator's License No. 6142 ✓  
Past Operator's Name & Address: Town Oil Company, Inc.  
16205 W. 287th Street Paola, KS 66071  
Title: President

Contact Person: Lester Town  
Phone: 913-294-2125  
Date: 6/1/11  
Signature: Lester Town

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New Operator's License No. 34350 ✓  
New Operator's Name & Address: Altavista Energy, Inc.  
PO Box 128 Wellsville, KS 66092  
Title: President

Contact Person: Doug Evans  
Phone: 785-883-4057  
Oil / Gas Purchaser: Coffeyville Resources  
Date: 6-1-11  
Signature: Doug Evans

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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.

\_\_\_\_\_ 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

DISTRICT \_\_\_\_\_ EPR 9-12-11 PRODUCTION 9-13-11 UIC 9-13-11  
Mail to: Past Operator \_\_\_\_\_ New Operator \_\_\_\_\_ District \_\_\_\_\_

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

060111 Ayres.pdf

\* Lease Name: Ayres

All in

\* Location: NE/4 Sec. 19, Twp. 17, R 23E (Miami Co.)

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*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  
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 # 6142  
Name: Town Oil Company, Inc.  
Address 1: 16205 W. 287th Street  
Address 2: \_\_\_\_\_  
City: Paola State: KS Zip: 66071 + \_\_\_\_\_  
Contact Person: Lester Town  
Phone: ( 913 ) 294-2125 Fax: ( 913 ) 294-4823  
Email Address: \_\_\_\_\_

Well Location:  
\_\_\_\_\_ NE Sec. 19 Twp. 17 S. R. 23 ☒ East ☐ West  
County: Miami  
Lease Name: Ayres Well #: \_\_\_\_\_

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

NE/4 of Section 19-17S-23E Miami Co.(156AC)

**Surface Owner Information:**

Name: Grinnell College - Trust  
Address 1: 733 Broad St  
Address 2: \_\_\_\_\_  
City: Grinnell State: IA Zip: 50112 + \_\_\_\_\_

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.

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If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owner(s) 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: 6/1/11 Signature of Operator or Agent: Lester Town Title: President

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**ACKNOWLEDGMENT TO THE LEASE.**

STATE OF IOWA  
County of POWESHIEK } ss.

**BE IT REMEMBERED**, That on this 31st day of October in the year of our Lord one thousand nine hundred and eighty, before me, a Notary Public in and for said County and State, came Frederick L. Maytag III and Robert W Anderson

to me personally known to be the identical person S who executed the above and foregoing instrument, and who each duly acknowledged the execution of the same.

In Witness Whereof, I have hereunto set my official signature and affixed my notarial seal the day and year first above written.  
My commission expires 9-30-82 Margaret B. Phelps Notary Public.

**ASSIGNMENT.**

**KNOW ALL MEN BY THESE PRESENTS:**

That \_\_\_\_\_ of \_\_\_\_\_  
State of \_\_\_\_\_ the within named grant \_\_\_\_\_ in consideration of the sum of \_\_\_\_\_ Dollars to \_\_\_\_\_  
in hand paid, the receipt whereof is hereby acknowledged, do \_\_\_\_\_ hereby sell, assign, transfer, set over and convey unto \_\_\_\_\_ heirs, and assigns, the within grant.

TO HAVE AND TO HOLD THE SAME FOREVER, subject nevertheless, to the conditions therein contained.

In Witness Whereof, The said grant \_\_\_\_\_ ha \_\_\_\_\_ hereunto set \_\_\_\_\_ hand this \_\_\_\_\_ day of \_\_\_\_\_ 19 \_\_\_\_\_

**ACKNOWLEDGMENT TO THE ASSIGNMENT.**

STATE OF \_\_\_\_\_ }  
County of \_\_\_\_\_ } ss.

**BE IT REMEMBERED**, That on this \_\_\_\_\_ day of \_\_\_\_\_ in the year of our Lord one thousand nine hundred and \_\_\_\_\_, before me, a Notary Public in and for said County and State, came \_\_\_\_\_ and \_\_\_\_\_

to me personally known to be the identical person \_\_\_\_\_ who executed the above and foregoing instrument, and who each duly acknowledged the execution of the same.

In Witness Whereof, I have hereunto set my official signature and affixed my notarial seal the day and year first above written.  
My commission expires \_\_\_\_\_ Notary Public.

**Original Compared with Record**

<b>OIL AND GAS LEASE</b>	FROM	TO	Date	Section	Township	Range	No. of Acres	County, Kansas.	Term	STATE OF <u>Kansas</u>	County of <u>Miami</u>	This instrument was filed for record on the _____ day of _____, 19 _____ at _____ o'clock _____ M., and duly recorded in book _____ page _____ of the records of this office.	By <u>Valter McDowell</u> Register of Deeds. <u>6.00</u>	Deputy.	When recorded return to	<u>LOC</u>

**ACKNOWLEDGMENT WHERE LESSOR SIGNS BY MARK.**

STATE OF \_\_\_\_\_ }  
County of \_\_\_\_\_ } ss.

On this \_\_\_\_\_ day of \_\_\_\_\_, A. D., 19 \_\_\_\_\_, before me, the undersigned, a Notary Public in and for the County and State aforesaid, personally appeared \_\_\_\_\_ and \_\_\_\_\_

to me known to be the identical person \_\_\_\_\_ who executed the within and foregoing instrument by \_\_\_\_\_ mark \_\_\_\_\_ in my presence and in the presence of \_\_\_\_\_ and \_\_\_\_\_

as witnesses, and acknowledged to me that \_\_\_\_\_

executed the same as \_\_\_\_\_ free and voluntary act and deed for the uses and purposes therein set forth.

Given under my hand and seal of office the day and year last above written.  
My commission expires \_\_\_\_\_ Notary Public.

**NOTE** — The signature by mark of a lessor who cannot write his name must be witnessed by two witnesses, one of whom must write lessor's name near such mark.

WELL #	CO-OWNER NAME	ACCT/WELL RP CYCLE TE	BEFORE CASING	AFTER CASING	PRODUCTION JIB	OIL REVENUE PAY-INTEREST	GAS REVENUE PAY-INTEREST	INTEREST TYPE
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560742 AYRES \* ACTIVE DOI \* ASSIGNMENT PROCESSED THRU: 0511

TOWN OIL CO KS:MIAM-019-0178-023E  
 999997 NO PAY 1.00000000 1.00000000 1.00000000

GRI610 GRINNELL COLLEGE - TRUST 3 .15000000 3 .15000000 ROYALTY  
 733 BROAD ST  
 GRINNELL, IA 50112

TOW315 TOWN OIL CO 4 3 .85000000 3 .85000000 WORKING  
 16205 W 287TH ST  
 PAOLA, KS 66071

***** TOTAL WELL INTEREST ***** OIL & GAS SAME	1.00000000	1.00000000	1.00000000	1.00000000	1.00000000
TAX METHOD:JIB PAYS[N] EXEMPT ROP[NNN]	TOTAL OWNERS	1	.85000000	.85000000	WORKING
DED METHOD:JIB PAYS[N] EXEMPT ROP[NNN]	TOTAL OWNERS	1	.15000000	.15000000	ROYALTY
** TOTAL DISTRIBUTABLE INTEREST **			1.00000000	1.00000000	
***** TOTAL NET J.I.B. *****					

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