# 060111\_Miller\_INJ.pdt

### 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 1 Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: \_ Gas Gathering System: Lease Name: Miller Saltwater Disposal Well - Permit No.: \_\_ W/2 \_ NE/4 Sec. 9 Twp. 20S R. 9 E V W feet from N / S Line Legal Description of Lease: W/2 NE/4 feet from E / W Line Enhanced Recovery Project Permit No.: \_ County: Rice Entire Project: Ves No Number of Injection Wells \_ Arbuckle Production Zone(s): Field Name: Chase Arbuckle Injection Zone(s): \*\* Side Two Must Be Completed. S Line of Section feet from Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) W Line of Section nR Settling Haul-Off Workover Burn Type of Pit: Emergency Mike Harmon 30364 / Contact Person: Past Operator's License No. Phone: 918-446-6114 Resource Operations, Inc. Past Operator's Name & Address: May 31, 2011 P O Box 9487, Tuisa OK 74157-0487 **Production Superintendent** Sean Fitzgerald 34557/ New Operator's Name & Address: Impact Ks Operating LLC Phone: 719 219 - 2960 RECEIVED W 110th St. Bldg SI, Suite 500 Overland Park, Kansas 66210 Manager Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 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 Impact KJ Operating LLC is acknowledged as the new operator of the above named lease containing the surface pit the new operator and may continue to inject fluids as authorized by Permit No.: E-19,436 . Recommended action permitted by No.: RECEIVED 3000 B Date:

New Operator

## SCANNED

#### Side Two

#### Must Be Filed For All Wells

* Lease Name: Miller		*Location: W/4 NE/4 Section 9-20S-9W			
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
k <u>1</u>	15-159-04867 1941	1980 Circle	2310 FEUFWL	Oil	Abandoned plugged
2	15-159-04167 / 1941	1980 FSLIFNL	1650 FED FWL	Oil	Abandoned no pluge
/3	15-159-04168	660 FSLIFNI	1650 FEL FWL	Oil	Abandoned
4	15-159-04169 - 00-01	660 FSLIFNI	$\sim$	INJ	Active
5	15-159-20718 √	1320_FSL/FNL)	1980 (FEL)FWL	Oil	PROD
		FSL/FNL	FEL/FWL		<u>.</u>
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
<u> </u>		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	<u></u>	FSL/FNL	FEL/FWL		

A separate sheet may be attached if necessary

When transletting a unit which consists of more than one lease please file a separate side twyfor each lease. Ya lease covers more than one section please indicate which section each well is located.

## Kansas Corporation Commission Oil & Gas Conservation Division

Form KSONA-1
July 2010
Form Must Be Typed
Form must be Signed
All blanks must be Filled

## 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.

ODERATOR: Lineary # 34552	Well Location:		
OPERATOR: License # 34552  Name: Impact KS Operating LLC	- Sec Two S B ☐ Fast ☐ West		
Address 1, 9393 West 110th Street	County:		
Address 2: Building 51, Suite 500	Lease Name: Miller Well #:		
Address 1: 9393 West 110th Street  Address 2: Building 51, Suite 500  City: Overland Park State: KS Zip: 66210 +  Contact Person: Sean Fitzgerald	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:  W/2 NE/4 Section 9-20S-9W, Rice County, KS		
Contact Person: Sean Fitzgerald			
Phone: ( 719 ) 219-2960 Fax: ( )			
Email Address:			
Surface Owner Information:			
Name: Mary Jeanette Miller			
Name: Mary Jeanette Miller Address 1: 1425 10th Road	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.		
Address 2:			
City: Chase State: KS Zip: 67524 +	_		
Select one of the following:	ed on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
owner(s) of the land upon which the subject well is or will t	the Act (House Bill 2032), I have provided the following to the surface one located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the print of the form C-1 or Form CB-1, the plat(s) required by this x, and email address.		
•			
KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the e owner(s). To mitigate the additional cost of the KCC performing this lling fee, payable to the KCC, which is enclosed with this form.		
KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hand	e owner(s). To mitigate the additional cost of the KCC performing this ling fee, payable to the KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1		
KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hand of the second option, submit payment of the \$30.00 hand form and the associated Form C-1, Form CB-1, Form T-1, or Form I hereby certify that the statements made herein are true and correct	e owner(s). To mitigate the additional cost of the KCC performing this ling fee, payable to the KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1 CP-1 will be returned.		
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

KCC WICHITA