

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 3 **
☐ 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 - 18,460
Entire Project: ☒ Yes ☐ No
Number of Injection Wells 3 **

Field Name: Gardner

Effective Date of Transfer: 07/01/2011 07/25/11
KS Dept of Revenue Lease No.: 100478 ✓
Lease Name: Roberts
_____ SW Sec. 11 Twp. 14 R. 22 ☒ E ☐ W
Legal Description of Lease: SW/4 - 11-14S-22E, 160 acres m/l
County: Johnson
Production Zone(s): Squirrel
Injection Zone(s): Squirrel

**** 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 OK

Past Operator's License No. 31002 ✓
Past Operator's Name & Address: Kelly Company LC
9746 Pflumm Road, Lenexa, KS 66215
Title: Member

Contact Person: James Guinotte
Phone: 620-432-4545
Date: 8/31/2011
Signature: Jim O. Guinotte

New Operator's License No. 34592 (LIC issued 7/25/11)
New Operator's Name & Address: _____
Kansas Resource Exploration and Development, LLC
9393 W 110th, STE 500, Overland Park, KS 66210
Title: Chief Operating Officer

Contact Person: Brad Kramer
Phone: 913-451-6758
Oil / Gas Purchaser: Coffeyville Resources
Date: 8/31/2011
Signature: BR

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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.

Kansas Resource Exploration & Development LLC is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: E-18,460 . Recommended action: _____
Need U3C 2009-2010
Date: 9-23-11 Cheryl L. 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 9-22-11 PRODUCTION 9-29-11 UIC 9-23-11
Mail to: Past Operator 9-23-11 New Operator _____ District 3 9-23-11

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

072511 Roberts INC.pdf

009

✓

* Location: SW/4 - 11-14S-22E

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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 # 31002
Name: Kelly Company LC
Address 1: 9746 Pflumm Road
Address 2: _____
City: Lenexa State: KS Zip: 66215 + _____
Contact Person: James Guinotte
Phone: (620) 432-4545 Fax: (_____) _____
Email Address: _____

Well Location: _____
- - - SW Sec. 11 Twp. 14 S. R. 22 ☒ East ☐ West
County: Johnson
Lease Name: ROBERTS Well #: (ALL)

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

**SW/4, Section 11, Township 14 South, Range
22 East, Johnson County, KS**

Surface Owner Information:

Name: ROBERTS, WAYNE H.
Address 1: 30340 W 159TH ST
Address 2: _____
City: GARDNER State: KS Zip: 66030 + _____

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: 8/31/2011

Signature of Operator or Agent: Jim O. Guinotte

Title: Member

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