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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

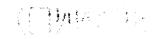
Form T-1
March 2010
Form must be Typed
Form must be Signed
All blanks must be Filled

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 _ Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: _ Gas Gathering System: Lease Name: Hardy Saltwater Disposal Well - Permit No.:. Sec. 11 Twp. 18/ R. 17 EXW feet from N / S Line feet from E / Enhanced Recovery Project Permit No.: E -27 County: Rush Entire Project: Yes No Number of Injection Wells _ Lansing Production Zone(s):_ Field Name: Otis-Albert Reichel Lansing Injection Zone(s): ** Side Two Must Be Completed. * 4020 FSL 4950 FEL 26 feet from N/ S Line of Section feet from KE / W Line of Section **Emergency** Burn Settlina Haul-Off Drilling Type of Pit: Workover Starr F Schlobohm Exp Past Operator's License No. Contact Person: 603-569-9790 Starr F Schlobohm Past Operator's Name & Address: 10 Greenleaf Drive; Wolfeboro, NH 03894 23-1 Date: Title: Owner Attorne Signature: RECEIVED Contact Person: John L Driscoll 33905 🗸 New Operator's License No. New Operator's Name & Address: Royal Drilling, Inc Phone: 785-483-6446 (Office) or 785-483-9580 (CeRFCEIVED 719 Witt Ave; PO Box 342 Coffeyville Resources Oil / Gas Purchaser: KCC WICH Russell, KS 67665 Date: 6-2 Title: President KCC WIC Signature: 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. the new operator of the above named lease containing the surface pit the new operator and may continue to inject fluids as authorized by 133 + PD9134 Recommended action: Authorized Signature Authorized Signature 10-7-1 DISTRICT HIC 10-1 District 1 Mail to: Past Operator **New Operator**

Side Two

Must Be Filed For All Wells



KDOR Lease	≥ No.: 133996				
* Lease Name:	t lands.		* Location:	11-18-17 W	
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)
1	15-165-00334	660 Circle	660 Circle	Oil	Prod
1-A	15-165-21390-0001	3016 FSD/FNL	4928 FELFWL	ກ ທີ່ເຂົ້ອ Inj	ACT
*Pite:	In P09734	4020 F@FNL	4950 FEDFWL	Emergeo	
		FSL/FNL	FEL/FWL	<u> </u>	7
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	RECEIVED JUN 2-7-2011 KCC WICHITA	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		RECEIVED
		FSL/FNL	FEL/FWL		OCT 0 5 2011
		FSL/FNL	FEL/FWL		KCC WICHITA
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

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

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.

Select the corresponding form being filed: C-1 (Intent) CB-1 (Ca	athodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License #_33905	Well Location:		
Name: Royal Drilling, Inc.	SecTwpS. R East 🗓 West		
Address 1: 719 Witt Avenue	County: Rush		
Address 2: P.O. Box 342	Lease Name: Hardy Well #:		
City: Russell State: KS Zip: 67665 + Contact Person: John L. Driscoll	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Phone: (785) 483-6446 Fax: (785) 483-6566	Section 11, Twp. 18, R. 17W		
Email Address: royaldrilling@ruraltel.net	25, 25, X. 1, W		
Surface Owner Information: Name: Donald C. Hardy Address 1: R.R. 1, Box 11 JUN 27 2011	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		
Address 2:	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:	RECEIVED		
City: State Zip TOFFITA	OCT 0.5 2011		
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodi the KCC with a plat showing the predicted locations of lease roads, tank the are preliminary non-binding estimates. The locations may be entered on Select one of the following:	batteries, pipelines, and electrical lines. The locations shown on the plat		
Select one of the following.			
I certify that, pursuant to the Kansas Surface Owner Notice Ac owner(s) of the land upon which the subject well is or will be loc CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this		
I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling for	knowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this ee, payable to the KCC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	ee with this form. If the fee is not received with this form, the KSONA-1 will be returned.		
I hereby certify that the statements made herein are true and correct of	the best of my knowledge and belief.		
Date: 623-11 Signature of Operator or Agent:	Title: President		