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:	udmittea with this form.
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: Cummings
✓ Saltwater Disposal Well - Permit No.: D-27,928	
Spot Location: 1650 feet from N / ✓ S Line	
feet from E / 🗸 W Line	Legal Description of Lease: SW/4
Enhanced Recovery Project Permit No.:	County: Graham
Entire Project: Yes No	County: Graham
Number of Injection Wells **	Production Zone(s): Lansing KC
Field Name: Dripping Springs	0-4189-
** Side Two Must Be Completed.	Injection Zone(s): Cedar Hills
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 OE
Past Operator's License No	Contact Person: Kenneth Vehige
Past Operator's Name & Address: Black Diamond Oil, Inc.	Phone: 785-625-5891
P.O. Box 641, Hays, KS 67601	Date: 9-16-2011
Title: President	Signature: 1 multiple
New Operator's License No. 33922 /	Contact Person: Rodney Brin
New Operator's Name & Address: Mustang Energy Corporation	Phone: 785-623-0533 RECEIVED
P.O. Box 1121 Hays, KS 67601	Oil / Gas Purchaser: Coffeyville Resources SEP 2 9 2011
Title: Prosided	Date: 9-16-2011 Signature: Adulty Bu- KCC WICHITA
Acknowledgment of Transfer: The above request for transfer of inject	etion authorization, surface pit permit # has been
noted, approved and duly recorded in the records of the Kansas Corpora	tion 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.
Mustary Every Corporation is acknowledged	as is acknowledged as
the new operator and may continue to inject fluids as authorized I	by the new operator of the above named lease containing the surface pit
Permit No.: <u>D-27,928</u> . Recommended action:	permitted by No.:
Date: 11-4-11 Charles Signature Authorized Signature	
DISTRICT	PRODUCTION 11.08.11 UIC 11-4-11 District Distric

Side Two

Must Be Filed For All Wells

	AN	
KDOR Lease No.:	133702 √	

* Lease Name:	Cummings		* Location: G	raham County	
Well No.	API No. (YR DRLD/PRE '67)	Footage from S (i.e. FSL = Feet from		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
2	15-065-2277 / -0000	2310 Circle	3955 Circle	Oil	Producing
3	15-065-22772-0001 v	1650 (FSL) FNL	3595 F 5 L 1980 FELFWL	INJ SWD	Producing
		F\$L/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	.	
		FSL/FNL	FEL/FWL		
		F\$L/FNL	FEL/FWL		
		F\$L/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		F\$L/FNL	FEL/F WL		
		F\$L/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		F\$L/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		OF APRIL
		F\$L/FNL	FEL/FWL		RECEIVED
		F\$L/FNL	FEL/FWL		SEP 2 9 2011
		FSL/FNL	FEL/FWL		KCC WICHITA
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		F\$L/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.

OPERATOR: License # 7076	_ Well Location:
Name: Black Diamond Oil, Inc.	
Address 1: P.O. Box 641	Challes
Address 2:	Lease Name: Cummings Well #: 2,3
City: Hays State: KS Zip: 67601	If filing a Form T.1 for multiple wells on a lease, enter the legal description of
Contact Person: Kenneth Vehige Phone: (785) 625-5891 Fax: (785) 621-4791	SW/4 of section 31-7-24 RECEIVED
Email Address: blackdiamond@eaglecom.net	SEP 2 9 2011
Surface Owner Information: Name: Ron Cummings Address 1: 3705 N. FARMLAND RD.	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.
City: Garden City State: KS Zip: 67846 +	
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cat	hodic Protection Borehole Intent), you must supply the surface owners and
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cat the KCC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered	
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cat the KCC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered Select one of the following: X I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this
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