

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

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.

Form T-1

March 2010

Form must be Typed

Form must be Signed

All blanks must be Filled

Check Applicable Boxes:

- ☒ Oil Lease: No. of Oil Wells 7 \*\*  
☒ Gas Lease: No. of Gas Wells 4 \*\*  
☐ 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-27,749  
Entire Project: ☒ Yes ☐ No  
Number of Injection Wells 1 \*\*

Field Name: Sedan-Peru

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

Effective Date of Transfer: April 1, 2012

KS Dept of Revenue Lease No.: 120696 & 215176

Lease Name: Oakridge

Sec. 12,14 Twp. 33S R. 12 ☒ E ☐ W

Legal Description of Lease: Portions of Sections 11, 12, 13, 14, 15, 23  
T33S - R12E

County: Chautauqua

Production Zone(s): Arbuckle Dolomite, Mulky Shale, Redd Sandstone

Injection Zone(s): Arbuckle Dolomite

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. 34374

Contact Person: Blaine Haag

Past Operator's Name & Address: Legacy Petroleum, LLC

Phone: 918-798-4510

P. O. Box 3336 - Bartlesville, OK 74006

Date: April 1, 2012

Title: Owner

Signature: [Signature]

New Operator's License No. 32255

Contact Person: P. J. Buck

New Operator's Name & Address: Kansas Energy Company, LLC

Phone: 620-725-3636

P. O. Box 68 - Sedan, KS 67361

Oil / Gas Purchaser: Coffeyville Resources / Post Rock

Date: April 1, 2012

Title: Member

Signature: [Signature]

**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 Energy Company LLC is acknowledged as  
the new operator and may continue to inject fluids as authorized by  
Permit No.: E-27,749 Recommended action: NONE

Date: 4-6-12 [Signature]  
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 4-5-12 PRODUCTION 4-18-12 UIC 4-6-12  
Mail to: Past Operator 4-6-12 New Operator 4-6-12 District (3) 4-6-12

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

RECEIVED

APR 04 2012

KCC WICHITA

040112\_oakridge.pdf

\* Location: Portions of Sections 11, 12, 13, 14, 15, 23 - T33S - R12E

*A separate sheet may be attached if necessary*

**RECEIVED**

**APR 04 2012**

**KCC WICHITA**

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 # 32255  
Name: Kansas Energy Company, LLC  
Address 1: P. O. Box 68  
Address 2: \_\_\_\_\_  
City: Sedan State: KS Zip: 67361 + \_\_\_\_\_  
Contact Person: P. J. Buck  
Phone: ( 620 ) 725-3636 Fax: ( 620 ) 725-3662  
Email Address: jonesbuck103@yahoo.com

Well Location:  
\_\_\_\_\_ Sec. \_\_\_\_\_ Twp. 33 S. R. 12 ☒ East ☐ West  
County: Chautauqua  
Lease Name: Oakridge Well #: Multiple

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

**Portions of Sections 11, 12, 13, 14, 15, 23 - T33S  
R12E**

**Surface Owner Information:**

Name: Maxine Grider  
Address 1: 2701 SW 29th  
Address 2: \_\_\_\_\_  
City: Oklahoma City State: OK Zip: 73119 + \_\_\_\_\_

*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: April 1, 2012 Signature of Operator or Agent:  Title: Member

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

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APR 04 2012

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