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: MUST be submit	ted with this form.
Oil Lease: No. of Oil Wells **	Effective Date of Transfer: 4-1-2012
Gas Lease: No. of Gas Wells **	KS Dept of Revenue Lease No.: 100356
Gas Gathering System:	Lease Name: Heath
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease: E2 NW4 Sec 27-34S-11E
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Chautauqua
Number of Injection Wells **	
·	Production Zone(s): Wayside
** Side Two Must Be Completed.	Injection Zone(s): Wayside
Surface Pit Permit No.:(AP! 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 OR
Past Operator's License No. 7155/	Contact Person: Dee Farris
Past Operator's Name & Address: Bill Farris (deceased)	Phone: 620-725-3772
888 State HWY 99 Sedan, KS 67361	Date: 5-21-2012
Title: operator	La India
Title: Operation	Signature: 1000 January
New Operator's License No. 34707	Contact Person: Dee Farris RECEIVED
New Operator's Name & Address: Farris Oil, Inc.	Phone: 620-725-3772 JUN 0 8 2012
888 State HWY 99 Sedan, KS 67361	Oil / Gas Purchaser: Coffeyville Resources
	1\1.4. \VVII' \11\7-4
	Date: 5-21-2012
Title: operator	Signature: No Tarris
Acknowledgment of Transfer: The above request for transfer of injection a	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 a	above injection well(s) or pit permit.
is acknowledged as	is acknowledged as
the new operator and may continue to inject fluids as authorized by	the new operator of the above named lease containing the surface pit
Permit No.: Recommended action:	permitted by No.:
Date:	Date:
DISTRICT EPR New Operator New Operato	PRODUCTION 6.19.12 UIC 6-19-12
I man to. I dot operator New Operato	TDistrict

Must Be Filed For All Wells

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KDOR Lease No.: __100356

* Lease Name:	Heath		* Location:	E2 NW4 Sec 27-34S-	11E
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr	Section Line om South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
2	15-019-19912 1 Pre '67	4348 FSZ/FNL	4267 FE FWL	·	Prod
3	15-019-00204		3457 FEZ/FWL	Oil	Prod
4	15-019-00205	_		Oil	Prod
5	5-019-19913	4741 (FS)/FNL	3020 FED FWL	Oil	Prod
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		IUN 0 8 2012
		FSL/FNL	FEL/FWL		C WICHITA
		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.

OPERATOR: License # 34707	
Name: Farris Oil, Inc. Address 1: 888 State Hwy 99	E2 _NW Sec. 27 Twp. 34 S. R. 11 X East West
Address 2:	County: Chautauqua
City: Sedan State: KS Zip: 67361 +	Lease Name: Heath Well #:
Contact Person: Dee Farris	— If filing a Form T-1 for multiple wells on a lease, enter the legal description o the lease below:
Phone: (620) 725-3772 Fax: ()	E2 NW4 Section 27-34S-11E
Email Address:	
Surface Owner Information: Name: Dee Farris	
Name: Dee Fams Address 1: 888 State Hwy 99	When filing a Form T-1 involving multiple surface owners, attach an additional
	owner information can be found in the records of the register of deeds for the
Address 2:	COUNTY, AND IN THE FEAT ESTATE DISCOUNTY Tax records of the county transcurer.
City: Sedan State: KS Zip: 67361 +	-
are preliminary non-binding estimates. The locations may be entered	hodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat I on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
are preliminary non-binding estimates. The locations may be entered Select one of the following:	ink batteries, pipelines, and electrical lines. The locations shown on the plat I 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 owner(s) of the land upon which the subject well is or will be	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 CB-1, Form T-1, or Form
Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s).	Act (House Bill 2032), I have provided the following to the surface clocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form n being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.
Are preliminary non-binding estimates. The locations may be entered select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling the second option, submit payment of the \$30.00 handling the second option, submit payment of the \$30.00 handling the second option.	Act (House Bill 2032), I have provided the following to the surface clocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form n being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the powner(s). To mitigate the additional cost of the KCC performing this angle, payable to the KCC, which is enclosed with this form.
Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CB-1, Form T-1, or Form CB-1.	Act (House Bill 2032), I have provided the following to the surface clocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form to being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the bowner(s). To mitigate the additional cost of the KCC performing this ang fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 will be returned.
Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling orm and the associated Form C-1, Form CB-1, Form T-1, or Form CB-1, Form CB-1, Form T-1, or Form CB-1, Form CB-1, Form T-1, or Form CB-1, Form CB-1, Form T-1, or Form CB-1, Form	Act (House Bill 2032), I have provided the following to the surface clocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form to being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the bowner(s). To mitigate the additional cost of the KCC performing this and gree, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 will be returned.
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Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling orm and the associated Form C-1, Form CB-1, Form T-1, or Form CB-1, Form CB-1, Form T-1, or Form CB-1, Form CB-1, Form T-1, or Form CB-1, Form CB-1, Form T-1, or Form CB-1, Form	Act (House Bill 2032), I have provided the following to the surface clocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form to being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the bowner(s). To mitigate the additional cost of the KCC performing this and gree, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 will be returned.

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