

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 20 \*\*  
☐ Gas Lease: No. of Gas Wells \_\_\_\_\_ \*\*  
☐ Gas Gathering System: \_\_\_\_\_  
☒ Saltwater Disposal Well - Permit No.: \_\_\_\_\_  
Spot Location: 4630 feet from ☐ N / ☒ S Line  
150 feet from ☒ E / ☐ W Line  
☒ Enhanced Recovery Project Permit No.: E 21224  
Entire Project: ☐ Yes ☐ No  
Number of Injection Wells \_\_\_\_\_ \*\*

Field Name: Humboldt - Chanute

\*\* Side Two Must Be Completed.

Effective Date of Transfer: June 17, 2008

KS Dept of Revenue Lease No.: 114384 *DR*

Lease Name: Wiles / Hinkle

Sec. 31 Twp. 26 R. 18 ☒ E ☐ W

Legal Description of Lease: N2 SE4, S2 NE4, SE4 NW4

County: Allen

Production Zone(s): Cattleman

Injection Zone(s): Same

Surface Pit Permit No.: \_\_\_\_\_ feet from ☐ N / ☐ S Line of Section  
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ Drilling *DR*

Past Operator's License No. 32191 *Exp. 9/30/08*

Past Operator's Name & Address: Toshic Dynamics LLC

8226 E Highland, Scottsdale, AZ 85251

Title: Operator

Contact Person: Dale Jesseph

Phone: 620-431-4519

Date: May 5, 2003

Signature: *Dale Jesseph*

New Operator's License No. 33769 */*

New Operator's Name & Address: Black Diamond Research & Development Corp.

PO Box 537, Chanute, Kansas 66720

Title: Operator

Contact Person: Jerry L. Phillips

Phone: 620-431-4111

Oil / Gas Purchaser: Coffeyville Resources

Date: June 17, 2008

Signature: *Jerry L. Phillips*

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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.

Black Diamond Research & Development Corp is acknowledged as

the new operator and may continue to inject fluids as authorized by

Permit No.: E-21224 Recommended action: violations

NOT OVERDUE Dec. 2011 + Need last 5 yrs U30's

Date: 6-26-12 *Cheryl L. Bayle*

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 \_\_\_\_\_ PRODUCTION 7.02.12 UIC 6-26-12  
Mail to: Past Operator 6-26-12 New Operator 6-26-12 District 3 6-26-12

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

061708\_Wiles\_Hinkle\_INV.pdf

## Must Be Filed For All Wells

KDOR Lease No.: 114384 <sup>AR</sup>\* Lease Name: Wiles / Hinkle\* Location: Allen County, Kansas 31-26-18

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 NW	15-001-30230 ✓	2085 Circle 330 FSL/FNL	916 Circle 495 FEL/FWL	Oil Prod
2	15-001-90371 ✓	3180 FSL/FNL	165 FEL/FWL	Oil Inj
3 WIL 03	15-001-22948 ✓	2475 FSL/FNL	1320 FEL/FWL	Oil Prod
4	15-001-22975 ✓	2464 na FSL/FNL	115 na FEL/FWL	Oil Prod
5	15-001-24966-00-01 ✓	2145 FSL/FNL	165 FEL/FWL	Oil Inj
6	15-001-25330-00-02 ✓	1827 495 FSL/FNL	165 FEL/FWL	Oil Prod Inj
7	15-001-25331 ✓	1485 FSL/FNL	165 FEL/FWL	Oil Prod
8	15-001-25332 ✓	2475 FSL/FNL	165 FEL/FWL	Oil Prod
9	15-001-25333-00-02 ✓	2145 FSL/FNL	495 FEL/FWL	Oil Prod
10	15-001-26407 ✓	1485 FSL/FNL	495 FEL/FWL	Oil Prod
11	15-001-26543 ✓	1815 FSL/FNL	495 FEL/FWL	Oil Prod
*12	15-001-73407	2550 FSL/FNL	785 FEL/FWL	Oil Prod
13	15-001-28010 ✓	2475 FSL/FNL	495 FEL/FWL	Oil Prod
14	15-001-28028 ✓	3135 FSL/FNL	875 FEL/FWL	Oil Prod
15	15-001-28029 ✓	2475 FSL/FNL	825 FEL/FWL	Oil AI Inj
16	15-001-28030-00-01 ✓	2805 FSL/FNL	1225 FEL/FWL	Oil Prod
17	15-001-28032 ✓	3375 FSL/FNL	1145 FEL/FWL	Oil Prod
18	15-001-28033 ✓	2475 FSL/FNL	895 FEL/FWL	Oil Prod
19	15-001-28034 ✓	2805 FSL/FNL	165 FEL/FWL	Oil Prod
20	15-001-28035 ✓	2805 FSL/FNL	495 FEL/FWL	Oil Prod
21	15-001-28036 ✓	3417 3405 FSL/FNL	697 165 FEL/FWL	Oil Prod
22	15-001-28037-00-01 ✓	3465 FSL/FNL	1225 FEL/FWL	Oil AI Inj
23	15-001-28425 ✓	2475 FSL/FNL	1650 FEL/FWL	Oil Prod
H1	15-001-23428 ✓	na FSL/FNL	na FEL/FWL	Oil Prod
H2	15-001-02568 ✓	3210 FSL/FNL	2490 FEL/FWL	Oil Prod

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A separate sheet may be attached if necessary

\* Plugged wells are not transferred unless plugged by the new operator.  
 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.

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IN

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 # 33769  
Name: Black Diamond Research Dev. Corp  
Address 1: 316 West 14th  
Address 2: PO Box 537  
City: Chanute State: KS Zip: 66601  
Contact Person: Jerry Phillips / Marie Phillips  
Phone: (620) 431-4111 Fax: (620) 431-4999  
Email Address: jerry.phillips@212cosbglobal.net

Well Location:  
Sec. 31 Twp. 26 S. R. 18 ☒ East ☐ West  
County: Allen  
Lease Name: Wiles Well #: \_\_\_\_\_  
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: N2SE1/4, S2NE1/4, SENW1/4

**Surface Owner Information:**

Name: Mr. Robert Wiles  
Address 1: 600 800th St  
Address 2: \_\_\_\_\_  
City: Chanute State: KS Zip: 66601

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: 6/18/2012 Signature of Operator or Agent: [Signature] Title: President

\* Per Marie Phillips 6/22/12 BEM

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