020112 Blunk 17.pd

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: February 1, 2012 Gas Lease: No. of Gas Wells __1 KS Dept of Revenue Lease No.: Gas - 210355 Gas Gathering System:_ Lease Name: Blunk Saltwater Disposal Well - Permit No.: ___ _____feet from N/ S Line Legal Description of Lease: SW/4 & W/2 of SE/4 & SE/4 of NW/4 & feet from E / W Line SW/4 of NE/4 of Section 17-34-13W Enhanced Recovery Project Permit No.: _ Entire Project: Yes No County: _Barber Number of Injection Wells Production Zone(s): Mississippi Field Name: Aetna Gas Area Injection Zone(s):_ ** Side Two Must Be Completed. Surface Pit Permit No .: __ feet from N / S Line of Section (API No. if Drill Pit, WO or Haul) E / W Line of Section feet from Type of Pit: Emergency Burn Settling Haul-Off Workover 6006 Past Operator's License No. Contact Person: Ron Molz Past Operator's Name & Address: Molz Oil Co., Inc. Phone: 620-825-4030 POBOX 164 Kiowa, KS 67070 Title: President Signature: RECEIVED AUG 1 6 2012 Contact Person: Ron Molz New Operator's License No. New Operator's Name & Address: Chieftain Oil Co., Inc. Phone: 620-825-4030 KCC WICHITA PO Box 124 Oil / Gas Purchaser: Oneok Field Service, LLC Date: _2/1/2012 Kiowa, KS 67070 President Title: 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. _ 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 ______. Recommended action: permitted by No.: ___ Date: Authorized Signature Authorized Signature DISTRICT -

New Operator

District

Mail to: Past Operator _

Side Two

Must Be Filed For All Wells

de/
<i>"</i>

KDOR Lease No.: Gas - 210355

Lease Name:	Blunk		* Location: S	ec. 17-34S-13W	
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)
2	15-007-00475-0001	330 FSL FNL	3630 Circle	Gas	Producing
prochadad Miller		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		
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		1 JL/1 (VL			

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 (C	Cathodic Protection Borehole Intent)
OPERATOR: License # 33235 Name: Chieftain Oil Co., Inc. Address 1: PO Box 124	Well Location: SW_SE_SW_Sec. 17 Twp. 34 S. R. 13 East ▼ West County: Barber
Address 2:	Lease Name: Blunk Well #: 2
City: Kiowa State: KS Zip: 67070 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
- Ron Molz	the lease below:
Phone: (620) 825-4030 Fax: (620) 825-4029	
Phone: (620) 825-4030 Fax: (620) 825-4029 Email Address: kristimolz@gmail.com	
Surface Owner Information: Name: Billy Eugene Blunk Address 1: PO Box 278 Address 2: City: Riverside State: WA Zip: 98849 + 9718	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.
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and a batteries, pipelines, and electrical lines. The locations shown on the plat in the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be lo 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	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being 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 ac KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling	cknowledge that, because I have not provided this information, the rer(s). To mitigate the additional cost of the KCC performing this fee, 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-	fee 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 to Date: 2-1-12 Signature of Operator or Agent:	the bast of my knowledge and belief. Title: Trest DENT

RECEIVED

AUG 1 6 2012

KCC WICHITA

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

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Name: Chieftain Oil Co., Inc. Address 1: PO Box 124 Address 2: County: Barber Lease Name: Blunk Well #: 2 If filing a Form 7:1 for multiple wells on a lease, enter the legal description of the lease ballow: Well #: 2 If filing a Form 7:1 for multiple wells on a lease, enter the legal description of the lease ballow: Surface Owner Information: Name: Connie Schupbach Address 2: Carly: Scottsdale State: AZ Zip: 85258 + 0000 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 reads, 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:	OPERATOR: License # 33235	Well Location:		
Address 2: City: Kiowa State: KS zip: 67070 +				
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Surface Owner Information: Name: Connie Schupbach Address 1: 7211 N. Via Depaesia Address 2: City: Scottsdale State: AZ Zip: 85258 + 0000 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, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned. If choosing the second option, submit payment of the \$30.00 handling fee, payable to the KCC, which is enclosed 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.	Address O.	Lana Nama, Blunk	Well #:	
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KCC WICHITA