

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 1 **
- Gas Lease: No. of Gas Wells _____ **
- 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.: _____
- Entire Project: Yes No
- Number of Injection Wells _____ **

Field Name: Round Mound

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

Effective Date of Transfer: 02/01/2013

KS Dept of Revenue Lease No.: 105303

Lease Name: Finnesy

Sec. 35 Twp. 9 R. 15 E W

Legal Description of Lease: SW

County: Osborne

Production Zone(s): Lansing Group

Injection Zone(s): _____

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 OF Drilling

Past Operator's License No. 33621 /

Contact Person: Greg Shumaker

Past Operator's Name & Address: Marjorie L Mighell d/b/a Ram Services
626 West 5th St. Russell, KS 67665

Phone: 785-324-1393

Title: Production Foreman

Date: 2-25-13
Signature: [Signature]

Add'l Documentation On File

New Operator's License No. 33905 /

Contact Person: John L Driscoll

New Operator's Name & Address: Royal Drilling, Inc.
P.O. Box 291
Russell, KS 67665

Phone: 785-483-9580

Title: President

Oil / Gas Purchaser: Coffeyville Resources

Date: 2-25-13

Signature: [Signature]

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FEB 27 2013

KCC WICHITA

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.

_____ is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: _____ . Recommended action: _____
Date: _____
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 3/18/13 PRODUCTION 3-20-13 UIC 3-20-13
Mail to: Past Operator _____ New Operator _____ District _____

020113 Finnesy.pdf

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Gas Lease: No. of Gas Wells _____ **

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.: _____

Entire Project: Yes No

Number of Injection Wells _____ **

Field Name: Round Mound

Effective Date of Transfer: 02/01/2013

KS Dept of Revenue Lease No.: 104319

Lease Name: Finnessy

 - C - SW - SW Sec. 35 Twp. 9 R. 15 E W

Legal Description of Lease: _____

County: Osborne

Production Zone(s): Lansing Group

Injection Zone(s): _____

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

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

Past Operator's License No. 33621

Past Operator's Name & Address: Marjorie L. Mighell d/b/a RAM Services
626 W. 5th St. Russell, KS 67665

Title: Executrix

Contact Person: Denise Stritt, Executrix

Phone: 785-483-0607

Date: 03/08/2013

Denise A. Stritt

New Operator's License No. 33905

New Operator's Name & Address: Royal Drilling, Inc.
PO Box 291
Russell, KS 67665

Title: President

Contact Person: John L Driscoll

Phone: 785-483-9580

Oil / Gas Purchaser: Coffeyville Resources

Date: 03/08/2013

John L Driscoll

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_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ . Recommended action: _____

Date: _____
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 _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

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

Must Be Filed For All Wells

KDOR Lease No.: 104319

* Lease Name: Finnesy

* Location: NE SW SW 35-9S-15W

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)
<u>1</u>	<u>15-141-20001</u> ✓	<u>677</u> Circle <u>FSL</u> /FNL	<u>4531</u> Circle <u>FEL</u> /FWL	<u>Oil</u>	<u>Prod</u>
		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		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

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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 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)

OPERATOR: License # 33905
Name: Royal Drilling, Inc.
Address 1: 719 W Witt Ave
Address 2: P.O. Box 291
City: Russell State: KS Zip: 67665 + 0291
Contact Person: John L Driscoll
Phone: (785) 483-9580 Fax: (785) 483-6566
Email Address: royaldrilling@ruraltel.net

Well Location:
NE SW SW Sec. 35 Twp. 9 S. R. 15 East West
County: Osborne
Lease Name: Finnessy Well #: 1

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

Surface Owner Information:

Name: Joel D & Debbie L Stull
Address 1: P.O. Box 307
Address 2: _____
City: Natoma State: KS Zip: 67651 + _____

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: 2-25-13 Signature of Operator or Agent: [Signature] Title: President

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