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,

Check Applicable Boxes:	MUST be submitted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 12-31-12
✓ Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 222306
Gas Gathering System:	Lease Name: SPENCER
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N /	S Line <u>NE _ SE Sec. 30 Twp. 17 R. 21 </u> F W
feet from E /	W Line Legal Description of Lease: E2 SE4 SEC 30-17-21E
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: FRANKLIN
Number of Injection Wells**	Production Zone(s): PERU
Field Name:	The contract of the contract o
	Injection Zone(s):
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul)	
Type of Pit: Emergency Burn Se	feet from LE / W Line of Section Haul-Off Workover Drilling
Past Operator's License No. 34834	Contact Person: KEVIN SPENCER
Past Operator's Name & Address: KEVIN SPENCER	Phone: 785-878 ₇ 3469
3960 ROCK CREEK ROAD, RANTOUL, KANSA	/ - / /
Title: OWNER	- Vale.
lite:	Signatule: What is a signatule with the signature of the
New Operator's License No. 5150	Contact Person: DENNIS KERSHNER
	Phone: 620-365-3111
New Operator's Name & Address: COLT ENERGY, INC	
P O BOX 388	Oil / Gas Purchaser: NONE
IOLA, KS 66749	Date:
Title: OFFICE MANAGER	Signature Charles Charles
Acknowledgment of Transfer: The above request for trans	sfer of injection authorization, surface pit permit # has been
	as Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership	·
	and a second reported to the post of the p
is ackn	nowledged as is acknowledged as
the new operator and may continue to inject fluids as a	uthorized by the new operator of the above named lease containing the surface pit
Permit No.: Recommended action:	
. Notorinieraeu autori.	pormitted by No
Date:	Date:
Authorized Signature	Authorized Signature
DISTRICT EPR7/19	//3 PRODUCTION 7.22.13 UIC 1-22-13
Mail to: Past Operator	New Operator District KCC WICHI

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

JUL 18 2013

Must Be Filed For All Wells

KDOD	No.: 222306	made ad	nou i oi riii iiono		
	SPENCER		* Location:E	E/2 OF SE/4 SEC 30-T	17 - 21E
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) (PROD/TA'D/Abandoned)	
3	24854 15-059 -24443	2164 Circle FSL/EHL	933 Circle	GAS	TA
		FSL/FNL	FEL/FWL		***************************************
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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	4444	FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		***************************************
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

A separate sheet may be attached if necessary

KCC WICHITA

_____FEL/FWL .

_ ____FSL/FNL _

RECEIVED

^{*}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.

Name: COLT ENERGY, INC Address 1: P O BOX 388 Address 2: City: IOLA State: KS Zip: 66749 + Contact Person: DENNIS KERSHNER Phone: (620) 365-3111 Fax: (620) 365-3170 Email Address: KEVIN SPENCER Address 1: 3960 ROCK ROAD Address 2: City: RANTOUL State: KS Zip: 66079 + Contact Road State: KS Zip: 66079 + Cont	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		
Address 2: City: HOLA State: KS Zip: 66749 + Contact Person: DENNIS KERSHNER Phone: (620) 365-3111 Fax: (620) 365-3170 Email Address: Surface Owner Information: Name: KEVIN SPENCER Address 1: 3960 ROCK ROAD Address 2: City: RANTOUL State: KS Zip: 66079 + If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Form C-1)	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: 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		
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Name: KEVIN SPENCER Address 1: 3960 ROCK ROAD Address 2:	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		
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic F the KCC with a plat showing the predicted locations of lease roads, tank batteries.)	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.		
are preliminary non-binding estimates. The locations may be entered on the Select one of the following:	teries, pipelines, and electrical lines. The locations shown on the plat		
I certify that, pursuant to the Kansas Surface Owner Notice Act (Fowner(s) of the land upon which the subject well is or will be located CP-1 that I am filing in connection with this form; 2) if the form being form; and 3) my operator name, address, phone number, fax, and expressions.	ed: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form I 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 acknow KCC will be required to send this information to the surface owner(task, I acknowledge that I am being charged a \$30.00 handling fee,	s). To mitigate the additional cost of the KCC performing this		
If choosing the second option, submit payment of the \$30.00 handling fee form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will	with this form. If the fee is not received with this form, the KSONA-1 be returned.		
I hereby certify that the statements made herein are true and correct to the	best of my knowledge and belief.		
Date: 6-28-2013 Signature of Operator or Agent:	Statler Title: PRODUCTION CLERK		

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

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