## 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

Check Applicable Boxes: MUST be submi	with the Kansas Surface Owner Notification Act, itted with this form.	
✓ Oil Lease: No. of Oil Wells 13	Effective Date of Transfer: July 1, 2013	
Gas Lease: No. of Gas Wells		9 /
Gas Gathering System:	KS Dept of Revenue Lease No.: 14070	9 <i>V</i>
Saltwater Disposal Well - Permit No.:	Lease Name: Bowman	
Spot Location:	Sec. 10 Twp Legal Description of Lease: E 1/2 of SE 1/4 and S	
Enhanced Recovery Project Permit No.:	W 1/2 of SW 1/4 Sec 2, T34S, R12E, NW 1/4 and £1/2	
Entire Project: Yes No		CORPORATION COMMISSION
Number of Injection Wells **	County:	
Field Name: Peru-Sedan	Production Zone(s): Wayside	AUG 2 0 2013
** Side Two Must Be Completed.	Injection Zone(s):	CONSERVATION DIVISION WICHITA, KS
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul)	feet from	Line of Section
Type of Pit: Emergency Burn Settling		Line of Section
Past Operator's License No5723 /	Contact Person: James B. Humphrey, Jr.	ng
Past Operator's Name & Address:John M. Denman Oil Co., Inc.		
P.O. Box 1226 Houston, TX 77251	Phone: 713-686-8606	
	Date: 8-/9	1-13
Title: President	Signature:	
	<u> </u>	
New Operator's License No. 32255	Contact Person: P.J. Buck	
New Operator's License No. 32255   New Operator's Name & Address: Kansas Energy Company, LLC	Contact Person: P.J. Buck Phone: (620) 725-3636	
	Phone: (620) 725-3636	
New Operator's Name & Address: Kansas Energy Company, LLC	Phone: (620) 725-3636 Oil / Gas Purchaser: Coffeyville Resources	2-12-12
New Operator's Name & Address: Kansas Energy Company, LLC P.O. Box 68, Sedan, KS 67361	Phone: (620) 725-3636  Oil / Gas Purchaser: Coffeyville Resources  Date: 8 -/ 2 -/ 3	8-/2-/3
New Operator's Name & Address: Kansas Energy Company, LLC	Phone: (620) 725-3636 Oil / Gas Purchaser: Coffeyville Resources	8-12-13 5_loty
New Operator's Name & Address: Kansas Energy Company, LLC P.O. Box 68, Sedan, KS 67361  Title: Agent - Tim Doty	Phone: (620) 725-3636  Oil / Gas Purchaser: Coffeyville Resources  Date: 8 / 2 / 3  Signature: 620) 725-3636	3_ loty
New Operator's Name & Address: Kansas Energy Company, LLC P.O. Box 68, Sedan, KS 67361  Title: Agent - Tim Doty  Acknowledgment of Transfer: The above request for transfer of injection a	Phone: (620) 725-3636  Oil / Gas Purchaser: Coffeyville Resources  Date: 8 / 2 / 3  Signature:	5 loty
New Operator's Name & Address: Kansas Energy Company, LLC P.O. Box 68, Sedan, KS 67361  Title: Agent - Tim Doty	Phone: (620) 725-3636  Oil / Gas Purchaser: Coffeyville Resources  Date: 8 -/ 2 -/ 3  Signature: 5 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 -	5 loty
New Operator's Name & Address: Kansas Energy Company, LLC P.O. Box 68, Sedan, KS 67361  Title: Agent - Tim Doty  Acknowledgment of Transfer: The above request for transfer of injection anoted, approved and duly recorded in the records of the Kansas Corporation C	Phone: (620) 725-3636  Oil / Gas Purchaser: Coffeyville Resources  Date: 8 -/ 2 -/ 3  Signature: 5 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 -	has been tains to Kansas Corporation
New Operator's Name & Address: Kansas Energy Company, LLC P.O. Box 68, Sedan, KS 67361  Title: Agent - Tim Doty  Acknowledgment of Transfer: The above request for transfer of injection a noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the a	Phone: (620) 725-3636  Oil / Gas Purchaser: Coffeyville Resources  Date: 8 / 2 / 3  Signature: 6 / 6 / 6 / 6 / 6 / 6 / 6 / 6 / 6 / 6	has been tains to Kansas Corporation is acknowledged as
New Operator's Name & Address: Kansas Energy Company, LLC P.O. Box 68, Sedan, KS 67361  Title: Agent - Tim Doty  Acknowledgment of Transfer: The above request for transfer of injection a noted, approved and duly recorded in the records of the Kansas Corporation C Commission records only and does not convey any ownership interest in the a is acknowledged as	Phone: (620) 725-3636  Oil / Gas Purchaser: Coffeyville Resources  Date: 8 / 2 / 3  Signature: 5 / 65  authorization, surface pit permit #  commission. This acknowledgment of transfer per bove injection well(s) or pit permit.	has been tains to Kansas Corporation is acknowledged as
New Operator's Name & Address: Kansas Energy Company, LLC P.O. Box 68, Sedan, KS 67361  Title: Agent - Tim Doty  Acknowledgment of Transfer: The above request for transfer of injection a noted, approved and duly recorded in the records of the Kansas Corporation C Commission records only and does not convey any ownership interest in the a is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.:	Phone: (620) 725-3636  Oil / Gas Purchaser: Coffeyville Resources  Date: 8 / 2 / 3  Signature: 5 / 6 / 6 / 6 / 6 / 6 / 6 / 6 / 6 / 6 /	has been tains to Kansas Corporation is acknowledged as
New Operator's Name & Address: Kansas Energy Company, LLC P.O. Box 68, Sedan, KS 67361  Title: Agent - Tim Doty  Acknowledgment of Transfer: The above request for transfer of injection a noted, approved and duly recorded in the records of the Kansas Corporation C Commission records only and does not convey any ownership interest in the a is acknowledged as the new operator and may continue to inject fluids as authorized by	Phone: (620) 725-3636  Oil / Gas Purchaser: Coffeyville Resources  Date: 8 / 2 / 3  Signature: 5 / 4  Date: 6 / 5 / 6 / 6 / 6 / 6 / 6 / 6 / 6 / 6 /	has been tains to Kansas Corporation is acknowledged as
New Operator's Name & Address: Kansas Energy Company, LLC P.O. Box 68, Sedan, KS 67361  Title: Agent - Tim Doty  Acknowledgment of Transfer: The above request for transfer of injection a noted, approved and duly recorded in the records of the Kansas Corporation C Commission records only and does not convey any ownership interest in the a is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action:  Date:	Phone: (620) 725-3636  Oil / Gas Purchaser: Coffeyville Resources  Date: 8 / 2 / 3  Signature: 5 / 4  Date: 6 / 5 / 6 / 6 / 6 / 6 / 6 / 6 / 6 / 6 /	has been tains to Kansas Corporation is acknowledged as containing the surface pit

#### Must Be Filed For All Wells

KDOR Lease	140709 • No.:			NE	cElH
* Lease Name:	Bowman		* Location:		and Sec. 3. Twp. 34, Rge. 12
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr	Section Line rom South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-019-22628		2283 (FEV/FWL	Oil	PROD Sec 3
2	15-019-22629		2560 FEVFWL	Oil	PROD (
3	15-019-24612	1149 (FSL/FNL	2375 FEI/FWL	Oil	PROD
4	15-019-40107 /	1193 (FS) /FNL	2454 (FEL)FWL	Oil	TA'D
5	15-019-40108	4973 (FS) /FNL	93 (FE)/FWL	Oil	TA'D Sec 10
6	15-019-40109/	4996 (FSL)FNL	454 FELFWL	Oil	TA'D
7	15-019-40110	3686 FS)/FNL	413 FELFWL	Oil	TA'D
8	15-019-40111	2879 (FSI)/FNL	487 FEL/FWL	Oil	TA'D
9	15-019-40112	2869 (FS)/FNL	849 (FE)/FWL	Oil	TA'D
10	15-019-40113	2851 (FSL)FNL	1226 (FE)/FWL	Oil	TA'D
11	15-019-40114~	3679 (FSI)/FNL	1059 FEL/FWL	Oil	TA'D Sec. 10
12	15-019-40115	4311 FSI/FNL	1073 FEL FWL	Oil	TA'D
13	15-019-40116	5003 (FSI)/FNL	1101 (FEL)FWL	Oil	TA'D
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
1,3,0		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
78		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	KANSA	RECEIVED AS CORPORATION COMMISSION
		FSL/FNL	FEL/FWL		AUG 2 0 2013
		FSL/FNL	FEL/FWL .		CONSERVATION DIVISION WICHITA, KS

A separate sheet may be attached if necessary

<sup>\*</sup> 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 # 32255			
Name. Nansas Energy Company	Well Location:		
Name: Kansas Energy Company Address 1: P.O. Box 68	Sec. 10 & 3 Twp. 34 S. R. 12 X East West		
	County: Chautauqua		
Address 2:	Lease Name: Bowman Well #:		
Contact Person: P.J. Buck	— If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Phone: ( 620 ) 725-3636 Fax: ( 620 ) 725-3662	E 1/2 of SE 1/4 and SW 1/4 of SE 1/4 of Sec.3 T34S		
Email Address:	R12 and EW 1/2 of SW 1/4 Sec 2, T34S, R12E, NW 1/4 and £ 1/2 of NE 1/4 of Sec 10 T34S, R12E		
Surface Owner Information:			
me: Edwin and Jann Bowman  When filing a Form T-1 involving multiple surface owners, attack			
ddress 1: 901 Road 26	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		
ddress 2:	county, and in the real estate property tax records of the county treasurer		
re preliminary non-binding estimates. The locations may be entere	nthodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
elect one of the following:			
	e Act (House Bill 2032) I have provided the following to the conference		
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; and 3) my operator name, address, phone number, factors.	m being filed is a Form C-1 or Form CB 1, the plate) required to		
CP-1 that I am filling in connection with this form; 2) if the following and 3) my operator name, address, phone number, fa:  I have not provided this information to the surface owner(s).  KCC will be required to send this information to the surface	m being filed is a Form C-1 or Form CB 1, the plates a series of the state of the s		
CP-1 that I am filling in connection with this form; 2) if the form; and 3) my operator name, address, phone number, fa:  I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 handless.	lacknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ing fee, payable to the KCC, which is enclosed with this form.		
CP-1 that I am filling in connection with this form; 2) if the following and 3) my operator name, address, phone number, factoring and 3) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address, phone number, factoring and 5) my operator name, address and factoring and factoring and factoring and factoring and factoring	le located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this k, and email address.  I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ing fee, payable to the KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1 CP-1 will be returned.		

AUG 2 0 2013

CONSERVATION DIVISION WICHITA, KS