

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 7 1WSW
- ☐ 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.: E 24233
- Entire Project: ☒ Yes ☐ No
- Number of Injection Wells 1 ..

Field Name: PAOLA-RANTOUL

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

Effective Date of Transfer: 01/01/2013

KS Dept of Revenue Lease No.: 117103

Lease Name: GILCHRIST

.. - N/2 - E/2 - SE/4 Sec. 4 Twp. 18S R. 21 ☒ E ☐ W

Legal Description of Lease: N/2 OF E/2 OF SE4

County: FRANKLIN

KCC WICHITA

Production Zone(s): SQUIRREL

SEP 12 2013

Injection Zone(s): SQUIRREL

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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 OR ☐ Drilling

Past Operator's License No. 32834 /

Past Operator's Name & Address: JTC OIL, INC

PO BOX 24386 STANLEY KANSAS, 66283

Title: PRESIDENT

Contact Person: TOM CAIN

Phone: 913-208-7914 **RECEIVED**
KANSAS CORPORATION COMMISSION

Date: 8-6-13 **AUG 26 2013**

Signature: [Signature] **CONSERVATION DIVISION**
WICHITA, KS

New Operator's License No. 33741 /

New Operator's Name & Address: ENERJEX KANSAS, INC

2038 S. PRINCETON ST., STE B

OTTAWA, KS 66067

Title: CEO

Contact Person: ROBERT WATSON

Phone: 785-241-2228

Oil / Gas Purchaser: _____

Date: 6/19/2013

Signature: [Signature]

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.

Energex Kansas Inc is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: E-24,233. Recommended action: Violation
Need UIC's for last 5 yrs 2007-2012
Date: 9-13-13 Cheryl [Signature]
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 9/13/13 PRODUCTION 9.17.13 UIC 9-13-13
Mail to: Past Operator 9-13-13 New Operator 9-13-13 District (3) 9-13-13

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

Must Be Filed For All Wells

* Lease Name: GILCHRIST

* Location: **N/2 OF E/2 OF SE/4 S4 T18S R21E**

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KANSAS CORPORATION COMMISSION

AUG 26 2013

**CONSERVATION DIVISION
WICHITA, KS**

* 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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* Location: NE/4 SE/4 4-18S-21E

* 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

**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 # 33741
Name: ENERJEX KANSAS, INC.
Address 1: 2038 SO. PRINCETON
Address 2: SUITE B
City: OTTAWA State: KS Zip: 66067 +
Contact Person: AMY MCFADDEN
Phone: (785) 241-2228 Fax: (785) 241-2231
Email Address: amcfadden@enerjexresources.com

Well Location:
N²E²SE⁴ Sec. 4 Twp. 18 S. R. 21 ☒ East ☐ West
County: FRANKLIN
Lease Name: GILCHRIST Well #: _____

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

N²E²SE⁴ 4-185-21E

Surface Owner Information:

Name: See attached
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ +

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: 9/10/2013 Signature of Operator or Agent: Amy J McFadden Title: AGENT/EMPLOYEE
AUTHORIZED TO
SIGN FOR
ENERJEX

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

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Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 33741
Name: ENERJEX KANSAS, INC
Address 1: 2038 S PRINCETON, SUITE B
Address 2: _____
City: OTTAWA State: KS Zip: 66067 + _____
Contact Person: ELIZABETH BRINKMEYER
Phone: (785) 241-2228 Fax: (_____) _____
Email Address: AMCFADDEN@ENERJEXRESOURCES.COM

Well Location:
N/2 E/2 SE Sec. 4 Twp. 18 S. R. 21 ☒ East ☐ West
County: FRANKLIN
Lease Name: GILCHRIST Well #: BSP-GC1
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
**NE/4 SE/4 SEC 4 T18-S, R 21-E, FRANKLIN
COUNTY, KS**

Surface Owner Information:

Name: TIMOTHY AND DELORES FAYE NOBLES
Address 1: 1782 VIRGINIA ROAD
Address 2: _____
City: OSAWATOMIE State: KS Zip: 66064 + _____

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Select one of the following:

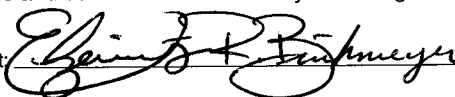
- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with 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.
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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 8-6-2013

Signature of Operator or Agent: _____



Title: COMPLIANCE

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Gilchrist Lease Surface Owners

Timothy and Delores Faye Nobles
1782 Virginia Road
Osawatomie, KS 66064

John and Lisa Rickey
1756 Virginia Rd
Osawatomie, KS 66064

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