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:	nea with this form.	
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: September 1, 2013	
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 111573	
Gas Gathering System:	Lease Name: Mai	
Saltwater Disposal Well - Permit No.: D 23731		
Spot Location: 1371 feet from ☐ N / ✓ S Line	<u>SW Sec. 15 Twp. 15 R. 14 </u> E W	
3293 feet from	Legal Description of Lease: S/2SW/4 & S/2N/2SW/4	
Enhanced Recovery Project Permit No.:		
Entire Project: Yes No	County: Russell KCC WICHITA	
Number of Injection Wells **	1	
Field Name: Trapp	Production Zone(s): Cedar Hills Injection Zone(s): Cedar Hills PECFIVED	
** Side Two Must Be Completed.	Injection Zone(s): CED ALL MILLS RECEIVED	
	1/60=	
Surface Pit Permit No.:	feet from N / S Line of Section	
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section	
Type of Pit: Emergency Burn Settling	Haul-Off Workover / / Drilling	
	Owen McOuade	
Past Operator's License No. 31203 Owens Rumping Service	Contact Person: Owen McQuade	
Past Operator's Name & Address: Owens Pumping Service	Phone: 785-483-6321	
640 E. Sunset Ave, Russell, KS 67665	Date: 8-30-13	
Title: Owner	Signature: Mula Mu Queens.	
New Operator's License No. 5259	Contact Person: Allen Bangert	
New Operator's Name & Address: Mai Oil Operations, Inc.	Phone: 785-483-355 1676	
101 W. Wichita Ave, Russell, KS 67665	Oil / Gas Purchaser: Coffeyville Resources	
	Date: 9-35-2013	
Draductions Cuncrintendent		
Title: Productions Superintendent	Signature: Weller Bangut	
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # has been	
-	Commission. This acknowledgment of transfer pertains to Kansas Corporation	
Commission records only and does not convey any ownership interest in the a	•	
	noore injection really, or property	
Mai Oil Operations Jue 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	
Permit No.: D-23,731. Recommended action: Viala hour	permitted by No.:	
Need use's for last 5413 2007-2012		
Date: 10-3-13 Cherry Deyl)	Date:	
Authorized Gignature	Authorized Signature	
m 2 12	PRODUCTION 10.9.13 Up 10-3-13	
Mail to: Past Operator 10-3-15 New Operato	or 10-3-13 District 4 10-3-13	

Side Two

Must Be Filed For All Wells

KDOR Lease No.: 111573	
* Lease Name: Mai	• Location: SW/4 15-15-14

* Lease Name: Mal		* Location: SW/4 15-15-14			
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr	Section Line om South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-167-21133 (1978) 🗸	330 Circle	2970 FEDFWL	Oil	Prod
2	15-167-21838 (1981) 🗸	990 ESUFNL	2970 FEI/FWL	Oil	Prod
4	15-167-19251-0001 (1982)	1371 SIFNL	3293 ELFWL	SWD	Al
		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		
		FSL/FNL	•		
		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		KCC WICHITA
			FEL/FWL		SEP 2 7 2013
			FEL/FWL		RECEIVED

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.

OPERATOR: License # 5259					
OPERATOR: License #	Well Location:				
Name: Mai Oil Operations, Inc.		. 15 s. R. 14 ☐ East 🗷 West			
Address 1: 101 W. Wichita	Duccell				
		Well #: 2			
Address 2: City: Russell State: KS Zip: 67665 +					
Contact Person: Allen Bangert	the lease below:				
Phone: (785) 483-2169 Fax: ()	- SW4 15-15-14				
Email Address:					
Surface Owner Information: Name: Merlin K. & Bonita M. Ney	When filing a Form T1 involving multi-				
Address 1: 116 Eves Dr.	sheet listing all of the information to the	sheet listing all of the information to the left for each surface owner. Surface			
Address 2:	 owner information can be found in the county, and in the real estate property 	records of the register of deeds for the			
City: Russell State: KS Zip: 67665		and to the state of the state o			
are preliminary non-binding estimates. The locations may be entere		s. The locations shown on the plat			
Select one of the following:	u on the Form C-1 plat, Form CB-1 plat, or	s. The locations shown on the plat a separate plat may be submitted.			
Select one of the following: CI 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 for form; and 3) my operator name, address, phone number, factoric land the surface owner(s). I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface.	te Act (House Bill 2032), I have provided be located: 1) a copy of the Form C-1, Form being filed is a Form C-1 or Form CB-1 x, and email address. I acknowledge that, because I have not pict the additional cost to when I have not pict owner(s). To mitigate the additional cost	the following to the surface m CB-1, Form T-1, or Form the plat(s) required by this			
Select one of the following: Lettify 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 forform; and 3) my operator name, address, phone number, factoric I have not provided this information to the surface owner(s).	the Act (House Bill 2032), I have provided the located: 1) a copy of the Form C-1, Form the located is a Form C-1 or Form CB-1 at, and email address. I acknowledge that, because I have not precover(s). To mitigate the additional cost ling fee, payable to the KCC, which is enclosing fee with this form. If the fee is not recovering fee with this form. If the fee is not recovering fee with this form.	the following to the surface m CB-1, Form T-1, or Form the plat(s) required by this covided this information, the of the KCC performing this used with this form.			

KCC WICHITA

SEP 27 2013

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

RECEIVED