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 1 Effective Date of Transfer: 9-17-2013 Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: __112656 Gas Gathering System: Lease Name: Soeken Saltwater Disposal Well - Permit No.: _-c__ s2__ se__sec. _27_ lwp. _26_ R. _13_ E 🗸 W Spot Location: 870 feet from N / ✓ S Line Legal Description of Lease: S1/2 of the SE1/4 of sec. 27-26R-13W feet from VE / W Line Enhanced Recovery Project Permit No.: Entire Project: Yes No County: Pratt Number of Injection Wells Production Zone(s): Mississippi Field Name: Iuka-Carmi Injection Zone(s): ** Side Two Must Be Completed. Surface Pit Permit No.: _ feet from N / S Line of Section (API No. if Drill Pit. WO or Haul) E / W Line of Section Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling Past Operator's License No. Janet Gee Contact Person: Past Operator's Name & Address: Redboot Production Phone: 620-546-1513 Date: 9-17-2013 875 SE 10th ST. Stafford KS 67578-9336 Title: Owner KCC WICHITA New Operator's License No. . Tom Garner Contact Person: New Operator's Name & Address: Thomas Garner Inc. Phone: 620-793-0766 SEP 25 2013 305 E. 7th Ave. Saint John KS 67576 Oil / Gas Purchaser: _Kelly Maclaskey Date: 9-17-2013 Title: owner Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 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 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 . Recommended action: permitted by No.: _ Date: Date: Authorized Signature Authorized Signature DISTRICT PRODUCTION Mail to: Past Operator. New Operator

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

Must Be Filed For All Wells

* Lease Name:	Soeken		* Location:	Sec. 27-26-13w	
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
1	151- 15- 145 -20644	870 (FS) IFNI	990 FB)FWL	oil	prod
		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/FWI		
		FSL/FNL			
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	1/0	O M//OLUTA
		FSL/FNL	FEL/FWL	KC	C WICHITA
		FSL/FNL	FEL/FWL	SE	P 2 5 2013
		FSL/FNL	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 # 32740	Moli Location	
Name: Redboot Production	_ Well Location:	S 19
Address 1: 875 SE. 10th St.	County: Pratt	S. R. 13 East X West
Address 2:	County: Pratt Lease Name: Soeken	1
City: Stafford State: KS Zin: 67578- 19336		
City: Stafford State: KS Zip: 67578- + 9336 Contact Person: Janet Gee	If filing a Form T-1 for multiple wells on a in the lease below:	lease, enter the legal description o
Phone: (620) 546-1513 Fax: ()		
Email Address:	-	
Surface Owner Information: Name: Ruth Drake Trust		
Address 1: Box 89	When filing a Form T-1 involving multiple so	urface owners, attach an additional
	owner information can be found in the reco	ords of the register of deeds for the
Address 2:	county, and in the real estate property tax r	ecords of the county treasurer.
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cath the KCC with a plat showing the predicted locations of lease roads, ta are preliminary non-binding estimates. The locations may be entered Select one of the following:		
Are preliminary non-binding estimates. The locations may be entered select one of the following: X 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 form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s).	Act (House Bill 2032), I have provided the located: 1) a copy of the Form C-1, Form C being filed is a Form C-1 or Form CB-1, the and email address.	the locations shown on the plat eparate plat may be submitted. following to the surface (B-1, Form T-1, or Form e plat(s) required by this
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