

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 5 **
- ☒ Gas Lease: No. of Gas Wells 0 **
- ☐ Gas Gathering System: _____
- ☒ Saltwater Disposal Well - Permit No.: D-22422
- Spot Location: 738 feet from ☒ N / ☐ S Line
- 88 feet from ☐ E / ☒ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Winterschied Unnamed

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

Effective Date of Transfer: 10/10/2013

KS Dept of Revenue Lease No.: 132765 ✓

Lease Name: Smith (AKA Daniel Rossillion)

_____ NW Sec. 7 Twp. 23 R. 15 ☒ E ☐ W

Legal Description of Lease: Northwest Fractional Quarter

County: Coffey

Production Zone(s): Squirrel/Mississippi

Injection Zone(s): Kansas City

Surface Pit Permit No.: _____

(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☒ Drilling

Past Operator's License No. 7988 ✓

Past Operator's Name & Address: James L. Folk, dba Double F Oil
1891 U.S. Hwy 54, Iola, Ks 66749

Title: Owner/Operator

Contact Person: James L. Folk

Phone: 620-365-6090

Date: 10/10/2013

Signature: James Folk

New Operator's License No. 31280 ✓

New Operator's Name & Address: Brian L Birk, dba Birk Petroleum
874 12th Rd SW

Burlington, Ks 66839

Title: Owner/Operator

Contact Person: Brian Birk

Phone: 620-364-1311

Oil / Gas Purchaser: Coffeyville Resources

Date: 10/10/2013

Signature: Brian Birk

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.

Birk, Brian L dba Birk Petroleum is acknowledged as

the new operator and may continue to inject fluids as authorized by

Permit No.: D-22422 . Recommended action: _____

Need USC's for 2007-2012

Date: 10-24-13 Cheryl L. Beyer

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 10/23/13 PRODUCTION OCT 24 2013 UIC 10-24-13
Mail to: Past Operator 10-24-13 New Operator 10-24-13 District 3 10-24-13

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

KDOR Lease No.: 132765^v (Rossillion)

* Lease Name: Smith (AKA Rossillion)

* Location: NW4 of 7-23-15E, Coffey Co.

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

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 # 31280
Name: Birk Petroleum
Address 1: 874 12th Rd SW
Address 2: _____
City: Burlington State: Ks Zip: 66839 + _____
Contact Person: Brian Birk
Phone: (620) 364-1311 Fax: (620) 364-1311
Email Address: blbpetro@gmail.com

Well Location:
_____ NW Sec. 7 Twp. 23 S. R. 15 ☒ East ☐ West
County: Coffey
Lease Name: Smith Well #: _____

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

Northwest Fractional Quarter

Surface Owner Information:

Name: Daniel Rossillion
Address 1: 2504 Copper Creek
Address 2: _____
City: Ponca City State: Ok Zip: 74604 + _____

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: 10/10/13 Signature of Operator or Agent: [Signature] Title: Agent

RECEIVED
KANSAS CORPORATION COMMISSION

OCT 21 2013

CONSERVATION DIVISION
WICHITA, KS