

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

110113_Renick_INJ.pdf

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 1 **
- ☐ Gas Lease: No. of Gas Wells 0 **
- ☐ Gas Gathering System: N/A
- ☒ Saltwater Disposal Well - Permit No.: D31340
- Spot Location: 251 feet from ☐ N / ☒ S Line
- 371 feet from ☒ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: -
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells 0 **

Field Name: WILDCAT

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

Effective Date of Transfer: 11/01/2013

KS Dept of Revenue Lease No.: 143569

Lease Name: RENICK

SE SE SE SE Sec. 05 Twp. 26 R. 29 ☐ E ☒ W

Legal Description of Lease: 05-T26S-R29W

County: GRAY

Production Zone(s): MISSISSIPPIAN

Injection Zone(s): ARBUCKLE

Surface Pit Permit No.: 15-069-20388-0100

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

closed 11/1/13

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling

☐ Haul-Off ☐ Workover OR ☒ Drilling

Past Operator's License No. 34729 /

Past Operator's Name & Address: SANCHEZ OIL AND GAS CORPORATION

1111 BAGBY, SUITE 1800, HOUSTON, TEXAS 77002

Title: X Vice President

Contact Person: Ed Birdwell

Phone: 713-783-8000

Date: 11/01/2013

Signature: [Signature]

New Operator's License No. 34380 34320

New Operator's Name & Address: LESSO ENERGY LLC

1125 SOUTH MAIN - P.O. BOX 465

CHASE, KANSAS 67524-0465

Title: PRESIDENT

Contact Person: BRUCE D. KELSO

Phone: 620-259-4000

Oil / Gas Purchaser: PLAINS MARKETING L.P.

Date: 11/01/2013

Signature: [Signature]

KCC WICHITA

OCT 28 2013

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Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 15-069-20388-0100 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.

Lasso Energy LLC is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: D-31340. Recommended action: None

Date: 12-23-13 [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 12/20/13

PRODUCTION JAN 07 2014

UIC 12-023-13

Mail to: Past Operator 12-23-13

New Operator 12-23-13

District 12-23-13

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

* Lease Name: RENICK * Location: 05-T26S-R29W

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* 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 # 34380
Name: LASO ENERGY LLC
Address 1: 1125 SOUTH MAIN
Address 2: P.O. BOX 465
City: CHASE State: KS Zip: 67524 + 0465
Contact Person: BRUCE D. KELSO
Phone: (620) 259-4000 Fax: (620) 259-4001
Email Address: bkelso@lassoenergy.com

Well Location:
SE SE SE SE Sec. 05 Twp. 26 S. R. 29 ☐ East ☒ West
County: GRAY
Lease Name: RENICK Well #: 5-1H & 5-1SWD

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
05-T26S-R29W

Surface Owner Information:

Name: W. R. Renick Inc
Address 1: 06514 U. S. HWY
Address 2: Attn: Dave Reynolds
City: Ingalls State: KS Zip: 67845 + 0000

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: 11/01/2013 Signature of Operator or Agent: [Signature] Title: PRESIDENT

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