# 030114 Rueb Farm SUME15.pd

is acknowledged as

the new operator of the above named lease containing the surface pit

## Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

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: Effective Date of Transfer: 3-1-14 Oil Lease: No. of Oil Wells \_\_\_\_ Gas Lease: No. of Gas Wells \_\_1\_ KS Dept of Revenue Lease No.: 230938 ✔ Gas Gathering System: Lease Name: RUEB FARM Saltwater Disposal Well - Permit No.: \_\_\_\_ Spot Location: \_\_\_\_\_\_ feet from N / S Line Legal Description of Lease: SWNE Sec. 15 T3S R42W \_\_\_\_\_feet from E / W Line Enhanced Recovery Project Permit No.: \_\_ KCC WICHITA County: CHEYENNE Entire Project: Yes No MAR 1 4 2014 Number of Injection Wells \_ Production Zone(s): NIOBRARA Field Name: CHERRY CREEK Niobrara Gas Area RECEIVED Injection Zone(s):\_ \*\* Side Two Must Be Completed. \_ feet from N / S Line of Section Surface Pit Permit No.: \_\_\_ (API No. if Drill Pit, WO or Haul) feet from E / W Line of Section Workover OR Drilling Haul-Off Emergency Settling Type of Pit: Contact Person: \_\_Liz Lindow Past Operator's License No. \_33190 / Past Operator's Name & Address: Noble Energy, Inc. Phone: 303-228-4342 Date: 3 1001 Noble Energy Way, Houston TX 77070 Title: Craig Koinzan. Manager - Business Development Signature: . Contact Person: Richard L. Payne New Operator's License No. . Phone: 918-526-5510, regulatory@foundationenergy.com New Operator's Name & Address: \_\_ Foundation Energy, 16000 N Dallas Parkway, Suite 875, Dallas TX 75248 WBI Energy Transmission Title: Joel P Sauer, Vice President Signature: 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.

Date:	Date:		. Date:		
Date.	Authorized Signature,	/		Authorized Signature	
DISTRICT	EPR <u>3/24/</u>	New Oper	PRODUCTIONMAR 2 5 2814_	UIC 3-25-14	

permitted by No.: \_\_\_

\_\_\_\_ is acknowledged as

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

\_\_\_\_\_ . Recommended action: \_\_\_\_

Permit No.:

### Side Two

# Must Be Filed For All Wells

	No.: 230938 ✓				
* Lease Name:	RUEB FARM		* Location:	SWNE Sec. 15 T3S R4	ł2W
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)
32-15B	15-023-21007 🗸	1480 Circle	2450 (FEL) FWL	GAS	PROD
		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	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	4	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL		-	·
			FEL/FWL		
			FEL/FWL		KCC WICHITA
			FEL/FWL		MAR 1 4 2014
			FEL/FWL		RECEIVED

A separate sheet may be attached if necessary

<sup>\*</sup> 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

**RECEIVED** 

# 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.

PERATOR: License # 33725  Imme: Foundation Energy  Iddress 1: 16000 N Dallas Parkway, Suite 875  Iddress 2:	SW_NE_Sec. 15 Twp. 3 S. R. 42 East West County: CHEYENNE  Lease Name: RUEB FARM Well #: 32-15B  If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Idress 2:	County: CHEYENNE  Lease Name: RUEB FARM Well #: 32-15B  If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Idress 2:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
ontact Person: Richard L. Payne  none: ( 918 ) 526-5510 Fax: ( )  nail Address: regulatory@foundationenergy.com	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
	ulo lease belon.		
urface Owner Information:			
nme: RUEB FARM INC.	When filing a Form T-1 involving multiple surface owners, attach an additional		
RUEB FARM INC.  Idress 1: 1625 ROAD 2	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		
ddress 2: ty: ST. FRANCIS State: KS Zip: 67756+	county, and in the real estate property tax records of the county treasurer.		
ty: ST. FRANCIS State: KS Zip: 67756 +			
elect one of the following:			
owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface clocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.		
I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling.	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ng fee, payable to the KCC, which is enclosed with this form.		
choosing the second option, submit payment of the \$30.00 handlin rm and the associated Form C-1, Form CB-1, Form T-1, or Form Cl	ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.		
nereby certify that the statements made herein are true and correct	to the best my knowledge and belief.		
ate: 2/27/14 Signature of Operator or Agent:	Title: Regulatory Analyst		
	KCC WICHI		
	MAR 1 4 2014		