

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**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.

Form T-1
March 2010
Form must be Typed
Form must be Signed
All blanks must be Filled

Check Applicable Boxes:

- ☒ Oil Lease: No. of Oil Wells 20 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☒ Enhanced Recovery Project Permit No.: E-20,671
- Entire Project: ☒ Yes ☐ No
- Number of Injection Wells 15 **

Field Name: Paola - Rantoul

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

Effective Date of Transfer: MAR 01 2014

KS Dept of Revenue Lease No.: 115341 ✓

Lease Name: Joeckel

_____ SW Sec. 13 Twp. 17S R. 22 ☒ E ☐ W

Legal Description of Lease: SW/4 & S/2 of SE/4 of 13-17S-22E

County: Miami

KCC WICHITA

Production Zone(s): Peru/Cattleman

APR 14 2014

Injection Zone(s): Peru/Cattleman

RECEIVED

Surface Pit Permit No.: _____

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

_____ feet from ☐ N / ☐ S Line of Section

_____ feet from ☐ E / ☐ W Line of Section

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

Past Operator's License No. 6142 ✓

Contact Person: Lester Town

Past Operator's Name & Address: Town Oil Company, Inc.

Phone: 913-294-2125

16205 West 287th Street Paola, Kansas 66071

Date: 4/10/14

Title: President

Signature: Lester Town

New Operator's License No. 34592 ✓

Contact Person: Brad Kramer

New Operator's Name & Address: _____

Phone: 913-451-6758

Kansas Resource Exploration & Development, LLC

Oil / Gas Purchaser: Coffeyville Resources

9393 West 110th Street, STE 500, Overland Park, Kansas 66210

Date: 4/10/14

Title: Chief Operating Officer

Signature: BK

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.

Kansas Resource Exploration & Development LLC is acknowledged as

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

Permit No.: E-20,671 . Recommended action: NONE

Date: 5-1-14

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

PRODUCTION

MAY 05 2014

UIC

Mail to: Past Operator 5-1-14

New Operator 5-1-14

District (3)

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

Must Be Filed For All Wells

KDOR Lease No.: 115341 ✓

* Lease Name: Joeckel

* Location: SW/4 & S/2 of SE/4 of 13-17S-22E

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)		
H-3	15-121-23019✓	947	Circle FSL/FNL	3977	Circle FEL/FWL	OIL	PROD
H-4	15-121-23020✓	413	FSL/FNL	4052	FEL/FWL	OIL	PROD
H-5	15-121-23021✓	1050	FSL/FNL	4417	FEL/FWL	OIL	PROD
H-6	15-121-23022✓	806	FSL/FNL	4436	FEL/FWL	OIL	PROD
H-7	15-121-23023✓	506	FSL/FNL	4502	FEL/FWL	OIL	PROD
H-8	15-121-23024✓	1275	FSL/FNL	4052	FEL/FWL	OIL	PROD
H-9	15-121-23025✓	1013	FSL/FNL	4108	FEL/FWL	OIL	PROD
H-10	15-121-23026✓	722	FSL/FNL	4155	FEL/FWL	OIL	PROD
H-11	15-121-23027✓	1000	FSL/FNL	3780	FEL/FWL	OIL	PROD
H-12	15-121-22440✓	150	FSL/FNL	4793	FEL/FWL	OIL	PROD
H-13	15-121-22441✓	180	FSL/FNL	3273	FEL/FWL	OIL	PROD
H-14	15-121-22442✓	375	FSL/FNL	1995	FEL/FWL	OIL	PROD
H-15	15-121-22443✓	330	FSL/FNL	4837	FEL/FWL	OIL	PROD
H-16	15-121-27407✓	2460	FSL/FNL	3845	FEL/FWL	OIL	PROD
M-1	15-121-22433✓	2475	FSL/FNL	5115	FEL/FWL	OIL	PROD
M-2	15-121-22434✓	2200	FSL/FNL	4840	FEL/FWL	OIL	PROD
M-3	15-121-22435✓	1925	FSL/FNL	5115	FEL/FWL	OIL	PROD
M-4	15-121-22436✓	1925	FSL/FNL	4840	FEL/FWL	OIL	PROD
M-5	15-121-22437✓	1650	FSL/FNL	5115	FEL/FWL	OIL	PROD
(1-07)	15-121-28361✓	760	FSL/FNL	4410	FEL/FWL	OIL	PROD
CW-3A	15-121-28367✓	350	FSL/FNL	4330	FEL/FWL	EOR	ACTIVE
CW-5	15-121-26525-00-01✓	600	FSL/FNL	4605	FEL/FWL	EOR	ACTIVE
CW-6	15-121-26635-00-01✓	944	FSL/FNL	4037	FEL/FWL	EOR	ACTIVE
CW-7A	15-121-28368✓	690	FSL/FNL	4310	FEL/FWL	EOR	ACTIVE

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.

KCC WICHITA**APR 14 2014****RECEIVED**

* Location: SW/4 OF 13-17S-22E

* 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.

~~RECEIVED~~

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 # 6142
Name: Town Oil Company, Inc.
Address 1: 16205 West 287th Street
Address 2: _____
City: Paola State: KS Zip: 66071 + _____
Contact Person: Lester Town
Phone: (913) 294-2125 Fax: (_____) _____
Email Address: _____

Well Location:
_____ SW Sec. 13 Twp. 17 S. R. 22 ☒ East ☐ West
County: Miami
Lease Name: Joeckel Well #: All

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
SW/4 & S/2 of SE/4 of 13-17S-22E

Surface Owner Information:

Name: JST Enterprises Inc. (c/o Town Oil Company)
Address 1: 16205 West 287th Street
Address 2: _____
City: Paola State: KS Zip: 66071 + _____

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: 4/10/14 Signature of Operator or Agent: Lester Town Title: President

KCC WICHITA
APR 14 2014
RECEIVED