

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.

Check Applicable Boxes:

- ☒ Oil Lease: No. of Oil Wells 14 - / WSW **
- ☐ 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-03377
- Entire Project: ☒ Yes ☐ No
- Number of Injection Wells 11 **

Field Name: PAOLA-RANTOUL**** Side Two Must Be Completed.**Effective Date of Transfer: 12/5/2013KS Dept of Revenue Lease No.: 114821 ✓Lease Name: BAKER_____ NW Sec. 26 Twp. 18S R. 22 ☒ E ☐ WLegal Description of Lease: W2 NW4 AND W2 E2 NW4 OF
S26-T18S-R22E CONTAINING 120 ACRESCounty: MIAMIProduction Zone(s): PERUInjection Zone(s): PERU

Surface Pit Permit No.: _____

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

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☒ DrillingPast Operator's License No. 34321 Exp. 11/30/13Past Operator's Name & Address: AD ASTRA OIL CORPORATION865 N. SOMMERSET TERR. #303, OLATHE KS 66062Title: PRESIDENTContact Person: MATTHEW EDWARDSPhone: 913-314-5560Date: 12/4/2014

Signature: _____

New Operator's License No. 34897 ✓New Operator's Name & Address: SCZ RESOURCES, LLC8614 CEDARSPUR DRIVEHOUSTON TEXAS 77055Title: VICE PRESIDENT OF OPERATIONSContact Person: JORGE RANZPhone: 713-444-8231 713-444-8231Oil / Gas Purchaser: HIGH SIERRADate: 12/4/2013

Signature: _____

KCC WICHITA**FEB 13 2014****RECEIVED**

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.

SCZ Resources LLC is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: E-03377 . Recommended action: Need KCC's
for last Syrs in all plus 8 MT's Needed
Date: 6-24-14 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 3/7/14 PRODUCTION 6-24-14 UIC 6-24-14
Mail to: Past Operator 6-24-14 New Operator 6-24-14 District (3) 6-24-14

Must Be Filed For All Wells

KDOR Lease No.: 114821* Lease Name: BAKER* Location: W2 NW4 AND W2 E2 NW4 OF S25 T18S R22E

Well No.	API No. (YR DRLD/PRE '87)	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	15-121-26836 ✓	3845 ^{Circle} FSL/FNL 4952 ^{Circle} FEL/FWL	OIL	PROD
✓ 2	15-121-02232 ✓	3748 FSL/FNL 5015 FEL/FWL	OIL	PROD
✓ 3	15-121-02233 ✓	3160 FSL/FNL 4924 FEL/FWL	OIL	PROD
✓ 4	15-121-26832 ✓	2935 FSL/FNL 4901 FEL/FWL	OIL	PROD
✓ 5	15-121-27027-0002 ✓	3059 FSL/FNL 4590 FEL/FWL	OIL	PROD
✓ 6	15-121-27028-0002 ✓	3265 FSL/FNL 4874 FEL/FWL	OIL	PROD
✓ 7	15-121-27031-0001 ✓	3050 FSL/FNL 4151 FEL/FWL	OIL	PROD
✓ 8	15-121-27030-0002 ✓	3505 FSL/FNL 4148 FEL/FWL	OIL	PROD
✓ 9	15-121-26756 ✓	4155 FSL/FNL 4158 FEL/FWL	OIL	PROD
✓ 10	15-121-26833 ✓	3920 FSL/FNL 4599 FEL/FWL	OIL	PROD
✓ 11	15-121-26834 ⁴³ ✓	3714 FSL/FNL 4591 FEL/FWL	OIL	PROD
✓ 12	15-121-27029-0002 ✓	4145 FSL/FNL 4592 FEL/FWL	OIL	PROD
✓ 13	15-121-26842 ✓	3712 FSL/FNL 4147 FEL/FWL	OIL	PROD
14	15-121-26779 ✓	3645 FSL/FNL 4906 FEL/FWL	WSW	PROD
D-17	15-121-02078-00-00	3536 FSL/FNL 5140 FEL/FWL	INJ	PROD ^{MIT over due 8-30-11}
A13	15-121-02105	2660 FSL/FNL 5220 FEL/FWL	Inj	Need last 5 yrs logs Inactive Need MIT
A17	15-121-02072	3066 FSL/FNL 5220 FEL/FWL	Inj	Inactive Need UIC's
A21	15-121-02073	3947 FSL/FNL 5220 FEL/FWL	Inj	Inactive Need MIT + UIC
C1512	15-121-02074	3083 FSL/FNL 5163 FEL/FWL	Inj	Inactive Need MIT
C19	15-121-02075	3711 FSL/FNL 5063 FEL/FWL	Inj	Inactive
C21	15-121-02076	4400 FSL/FNL 4840 FEL/FWL	Inj	KCC WICHITA Inactive Need MIT
E13	15-121-02079	2660 FSL/FNL 4400 FEL/FWL	Inj	FEB 13 2014 Inactive Need MIT
E15	15-121-02080	3046 FSL/FNL 4846 FEL/FWL	Inj	RECEIVED Inactive
G21	15-121-02089	4400 FSL/FNL 3960 FEL/FWL	Inj	Inactive Need MIT
G23	15-121-02090	4800 FSL - 3960 FEL	Inj	Inactive Need MIT

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.

* OK to Add per Hernandez Garcia of RBS - Phone
Call on 6-23-14 (George sent email for him to confirm)
6-24-14 - OK w/ George per phone

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.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 34897
Name: SCZ RESOURCES, LLC
Address 1: 8614 CEDARSPUR DRIVE
Address 2: _____
City: HOUSTON State: TX Zip: 77055 + _____
Contact Person: JORGE RANZ
Phone: (713) 444-8231 Fax: (_____) _____
Email Address: JORGE_RANZ@SCZRESOURCES.COM

Well Location:
_____-_____-_____- Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West
County: MIAMI
Lease Name: BAKER Well #: _____
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
**W2 NW4 AND W2 E2 NW4 S26 T18S R22E
CONTAINING 120 ACRES**

Surface Owner Information:

Name: LYNETTE LEGOSKI
Address 1: 1711 COUNTY ROAD 12
Address 2: _____
City: FLORISSANT State: CO Zip: 80816 + _____

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: 12/4/13 Signature of Operator or Agent: KCC WICHITA Title: VP of Ops and Eng

FEB 13 2014

RECEIVED

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

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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July 2010
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Name: SCZ RESOURCES, LLC
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City: HOUSTON State: TX Zip: 77055 + _____
Contact Person: JORGE RANZ
Phone: (713) 444-8231 Fax: (_____) _____
Email Address: JORGE_RANZ@SCZRESOURCES.COM

Well Location:
_____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West
County: MIAMI
Lease Name: BAKER Well #: _____
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**W2 NW4 AND W2 E2 NW4 S26 T18S R22E
CONTAINING 120 ACRES**

Surface Owner Information:

Name: PETE YOCUM
Address 1: 815 S TRAIL RIDGE DR
Address 2: _____
City: INDEPENDENCE State: MO Zip: 64050 + _____

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 12/14/13 Signature of Operator or Agent: [Signature] **KCC WICHITA** Title: Vp of Ops and Eng

FEB 13 2014

RECEIVED