

SCANNED

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 _____ **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☒ Saltwater Disposal Well - Permit No.: D1-31223
- Spot Location: 260 feet from ☐ N / ☒ S Line
- 265 feet from ☒ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Unnamed**** Side Two Must Be Completed.**Effective Date of Transfer: 4/1/14KS Dept of Revenue Lease No.: NALease Name: Robin 36-34-8 SWD 1SE SE SE SE Sec. 36 Twp. 34S R. 8 ☐ E ☒ WLegal Description of Lease: A 10-acre tract in SE/4 SE/4 SE/4 ofSection 36-34S-8W, Harper Co. KSCounty: Harper**KCC WICHITA**Production Zone(s): JUN 04 2014Injection Zone(s): Arbuckle/Reagan**RECEIVED**

Surface Pit Permit No.: _____

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

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling☐ Haul-Off ☐ Workover OR ☐ DrillingPast Operator's License No. 32334Past Operator's Name & Address: Chesapeake Operating Inc.P.O. Box 18496 Oklahoma City, OK 73154-0496Title: Executive Vice President - Acquisitions & DivestituresContact Person: Douglas J. JacobsonPhone: 405-935-4000Date: 5/30/14Signature: [Signature]New Operator's License No. 34192New Operator's Name & Address: Sandridge Exploration & Production LLC123 S. Robert S. Kerr AvenueOklahoma City, OK 73102Title: Senior Vice President - DevelopmentContact Person: Aaron ReynaPhone: 405-429-5673

Oil / Gas Purchaser: _____

Date: 5/22/14Signature: [Signature]

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.

Sandridge Exploration and Production LLC is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: D-31223. Recommended action: None

Date: 6-30-14

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 6-27-14PRODUCTION 7-7-14UIC 6-30-14Mail to: Past Operator 6-30-14New Operator 6-30-14District 2 6-30-14

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

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)
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[illegible]

* 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
January 2014
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 # 32334
Name: Chesapeake Operating Inc.
Address 1: P.O. Box 18496
Address 2: _____
City: Oklahoma City State: OK Zip: 73154 + _____
Contact Person: Katie A. Wright
Phone: (405) 935-2408 Fax: (405) 849-2408
Email Address: katie.wright@chk.com

Well Location:
SE SE SE SE Sec. 36 Twp. 34 S. R. 8 ☐ East ☒ West
County: Harper
Lease Name: Robin 36-34-8 Well #: SWD 1

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

Surface Owner Information:

Name: Tanis L. Lieurance and Marcy J. Kastens, as Trustees for the Margie A. McKee Revocable Trust, dated April 10, 2008
Address 1: 701 North Kansas
Address 2: _____
City: Anthony State: KS Zip: 67003 + _____

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 must provide the name and address of the surface owner by filling out the top section of this form and 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.

5/6/14
Date: _____ Signature of Operator or Agent: Katie Wright Title: Regulatory Analyst I

Katie Wright (8/6/2014)

Received
KANSAS CORPORATION COMMISSION

AUG 15 2014

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

CONSERVATION DIVISION
WICHITA, KS