

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form T-1  
July 2014

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 11 \*\*
- ☐ 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.: \_\_\_\_\_
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells \_\_\_\_\_ \*\*

Field Name: Paola-Rantoul

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

Effective Date of Transfer: 08/08/2014

KS Dept of Revenue Lease No.: 112084

Lease Name: Kitchen

SE1/4 - NE1/4 - \_\_\_\_\_ Sec. 7 Twp. 18S R. 22E ☒ E ☐ W

Legal Description of Lease: attached

County: Miami

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Production Zone(s): Squirrel

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Injection Zone(s): \_\_\_\_\_

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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 ☐ Drilling

Past Operator's License No. 8281- Deceased -death certificate attached

Contact Person: death certificate attached

Past Operator's Name & Address: Robert Kitchen

Phone: \_\_\_\_\_

37370 John Brown Hwy Osawatomie, KS 66064

Date: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Doc. On File

New Operator's License No. 35117

Contact Person: Misty/ Randy Kitchen

New Operator's Name & Address: Poverty Knob Production, LLC

Phone: 913-755-3763

39395 W 351st St Osawatomie, KS 66064

Oil / Gas Purchaser: Plains Marketing

Date: 8/28/14

Title: Owners, Managing Partners

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.

\_\_\_\_\_ is acknowledged as  
the new operator and may continue to inject fluids as authorized by  
Permit No.: \_\_\_\_\_ Recommended action: \_\_\_\_\_

Date: \_\_\_\_\_  
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 9/16/14 PRODUCTION SEP 17 2014 UIC 9-17-14  
Mail to: Past Operator \_\_\_\_\_ New Operator \_\_\_\_\_ District \_\_\_\_\_

\* Location: SE1/4-NE1/4, 7-18-22E

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WICHITA, KS

\* 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.

Kitchen # 112084

The Southeast Quarter of the Northeast Quarter (SE1/4NE1/4) of Section Seven (7), Township 18, Range 22, East of the 6th Principal Meridian, Miami County, Kansas; and

The West half (W1/2) of the Northeast Quarter (NE1/4) of Section Seven (7), Township Eighteen (18), Range Twenty-Two (22), excepting seven (7) acres out of the Southwest corner of said land, being a tract of land 32 rods North and South by 35 rods East and West;  
 ALSO: A tract of land out of the Northeast corner of the Northwest Quarter (NW1/4) of said section Seven (7) being 32 rods North and South by 35 Rods East and West more particularly described as follows: Beginning at the Northeast corner of the Northwest Quarter (NW1/4) of Section 7, thence West 35 rods; thence South 32 rods, thence East 35 rods; thence North 32 rods to the place of beginning, all being in Township 18, Range 22, East of the 6th P.M.; Miami County, Kansas;

EXCEPTING THEREFROM: Beginning at the point 1327.5 feet West of the Southeast corner of the Northeast Quarter of Section 7, Township 18 South, Range 22 East, Miami County, Kansas; thence West 220 feet; thence North 340 feet; thence East 220 feet; thence South 340 feet to the place of beginning, enclosing 1.7 acres, more or less; all being a part of the Northeast Quarter of Section 7, Township 18 South, Range 22 East, Miami County, Kansas;

And, The Northwest fractional Quarter of Section 7, Township 18, Range 22, excepting a tract of land in the Northeast corner thereof, described as follows: Beginning at the Northeast corner of said Quarter, thence West 35 rods; thence South 32 rods, thence East 35 rods, thence North 32 rods to the place of beginning; Miami County, Kansas; and also

A tract of land in the Southwest corner of the Northeast Quarter of Section 7, Township 18, Range 22, described as follows: Beginning at the Southwest corner of said Quarter, thence East 35 rods, thence North 32 rods, thence West 35 rods, thence South 32 rods to the place of beginning. Miami County, Kansas

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Form KSONA-1  
July 2014  
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**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 # 35117  
Name: Poverty Knob Production, LLC  
Address 1: 39395 W 351st St  
Address 2: \_\_\_\_\_  
City: Osawatomie State: KS Zip: 66064 + \_\_\_\_\_  
Contact Person: Misty/Randy Kitchen  
Phone: ( 913 ) 755-3763 Fax: ( \_\_\_\_\_ ) same  
Email Address: \_\_\_\_\_

Well Location:  
SE1/4 NW1/4 - - - - - Sec. 7 Twp. 18 S. R. 22 ☒ East ☐ West  
County: Miami  
Lease Name: Kitchen Well #: \_\_\_\_\_

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

**legal attached**

**Surface Owner Information:**

Name: Randy and Misty Kitchen  
Address 1: 39395 W 351st St  
Address 2: \_\_\_\_\_  
City: Osawatomie State: KS Zip: 66064 + \_\_\_\_\_

*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.

Date: 8/28/14 Signature of Operator or Agent: Misty M. Kitchen Title: owner, managing partner

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**SEP 10 2014**