

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 X4 \*\*
- 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.: E23807
- Entire Project:  Yes  No
- Number of Injection Wells 1 \*\*

Field Name: Wiggam

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

Effective Date of Transfer: 10/6/08

KS Dept of Revenue Lease No.: 122006

Lease Name: Tomlinson

Sec. 33 Twp. 32 s R. 10  E  W

Legal Description of Lease: ne 4, se 4 of 33 & sw 4 of 34 32s 10e  
200 acres

County: chautauwua

Production Zone(s): wayside ,cattleman,layton,mississippi,ar buckle

Injection Zone(s): Layton

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. 5370

Past Operator's Name & Address: Richard a Soule  
822 e river street, Eureka ks 67045

Title: owner

Contact Person: Richard A Soule

Phone: 620 583 7496

Date: 3/10/14

Signature: Richard A. Soule

**KCC WICHITA**

**APR 14 2014**

**RECEIVED**

New Operator's License No. 34185

New Operator's Name & Address: Flintstone Energy LLC  
9647 N e Cole Creek Road

El Dorado Ks 67042

Title: Manager

Contact Person: David Stackley

Phone: 316 321 4615 316 377 7775 cell

Oil / Gas Purchaser: pacer

Date: 3/10/14

Signature: David A Stackley

**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.

Flintstone Energy LLC is acknowledged as the new operator and may continue to inject fluids as authorized by

Permit No.: \_\_\_\_\_ . Recommended action: veel u3c's

for last 5 yrs 2009-2013

Date: 8-26-14 Cheryl A Boyer

Authorized Signature

\_\_\_\_\_ is acknowledged as the new operator of the above named lease containing the surface pit

permitted by No.: \_\_\_\_\_ .

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

Authorized Signature

DISTRICT _____	PRODUCTION _____	UIC _____
Mail to: Past Operator _____	New Operator _____	District (3) _____

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form KSONA-1  
July 2014

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 # 34185  
Name: Flintstone Energy llc  
Address 1: 9647 NE Cole Creek Rd  
Address 2: \_\_\_\_\_  
City: El Dorado State: ks Zip: 67042 + \_\_\_\_\_  
Contact Person: David Stackley  
Phone: ( 316 ) 321 4615 Fax: ( \_\_\_\_\_ ) \_\_\_\_\_  
Email Address: Davestackley@yahoo.com

Well Location:  
\_\_\_\_\_ Sec. 33 Twp. 32 S. R. 10  East  West  
County: Chautauwua  
Lease Name: Tomlinson Well #: \_\_\_\_\_

*If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:*  
ne 4,se4 of 33 &4 of 34 32s 10e  
200 acres

**Surface Owner Information:**

Name: Rachel Kossover  
Address 1: 5139 n Harborside ct  
Address 2: \_\_\_\_\_  
City: Wichita State: ks Zip: 67204 + \_\_\_\_\_

*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: 7/10/14 Signature of Operator or Agent: [Signature] Title: manager  
Received  
KANSAS CORPORATION COMMISSION

**AUG 18 2014**

CONSERVATION DIVISION  
WICHITA, KS