100114\_Koester, PdF

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

July 2014 Form must be Typed Form must be Signed All blanks must be Filled

Form T-1

# 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,

Check Applicable Boxes:	tted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 10/1/2014  KS Dept of Revenue Lease No.: 138410  Lease Name: Koester			
Gas Lease: No. of Gas Wells**				
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line	Legal Description of Lease: N2 SEC 36 AND S2 & NW4 SEC 25			
feet from E / W Line				
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County: RUSSELL Production Zone(s): LANSING			
Number of Injection Wells **				
Field Name: EULERT EAST				
** Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.:	feet from N / S Line of Section			
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling			
Past Operator's License No. 5159	Contact Person: KURT R. MAI			
Past Operator's Name & Address: MAI OIL OPERATIONS, INC	Phone: 214-219-8883			
8411 PRESTON RD. SUITE 800 DALLAS TX 75225	Date: 9/16/2014, Signature: Kuf R. Mai			
Title: PRESIDENT				
Title:				
New Operator's License No. 35014 35041	Contact Person: JUSTIN WEIGEL			
New Operator's Name & Address: WEIGEL OIL COMPANY, LLC.	Phone: 785-324-0180			
P.O. BOX 321 GORHAM, KANSAS 67640				
Received  KANSAS CORPORATION COMMISSION	Oil / Gas Purchaser: NCRA			
	Date: 9/12			
Title: OWNER	Signature: Justo & Weight			
CONSERVATION DIVISION				
WICHITA, KS  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	is acknowledged as			
the new operator and may continue to inject fluids as authorized by	the new operator of the above named lease containing the surface pit			
Permit No.: Recommended action:	permitted by No.:			
. Heconimended addon.	permitted by No			
Date:	Date:			
Date: Authorized Signature	Authorized Signature			
DISTRICT EPR EPR	PRODUCTION CCT 0 3 Z014 URCT 0 3 Z014			
Mail to: Past Operator New Operator				

#### Must Be Filed For All Wells

* Lease Name:	Koester			Location:	IE NE NE SEC 36-TW	P15S-RNG11W
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	
1	15-167-23414	200 Circle	450	<i>Circle</i> <b>f</b> EL/FWL	OIL	PROD
		FSL/FNL		FEL/FWL	No. 10.	
		FSL/FNL		FEL/FWL		
		FSL/FNL	***************************************	FEL/FWL		
		FSL/FNL		FEL/FWL		
		FSL/FNL		_ FEL/FWL		
		FSL/FNL		FEL/FWL		
		FSL/FNL		FEL/FWL		
		FSL/FNL		FEL/FWL		
		FSL/FNL		FEL/FWL	**	
		FSL/FNL		FEL/FWL		
		FSL/FNL		FEL/FWL		
		FSL/FNL		_ FEL/FWL		
		FSL/FNL		FEL/FWL		
		FSL/FNL		_ FEL/FWL		
		FSL/FNL		FEL/FWL		
		FSL/FNL		FEL/FWL		
				FEL/FWL		
				FEL/FWL		
		FSL/FNL		FEL/FWL		
-				FEL/FWL		
					wanaas COR	Received Poration commission
					ULI	01 2014
					CONSER!	<b>ATION</b> DIVISION CHITA, KS
		ESI/ENI		FFI /FWI		

A separate sheet may be attached if necessary

<sup>\*</sup> 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

Form KSONA-1
January 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 (C	Cathodic Protection Borehole Intent)			
5259				
OPERATOR: License # 5259  Name: Mai Oil Operations, Inc.	Well Location: NE _NE _ Sec. 36 Twp. 11 S. R. 15 ☐ East West			
Address 1: 8411 Preston Rd. Suite 800	Russell			
	County: Russell  Lease Name: Koester Well #: 1			
Address 2:				
City: State: Zip: 75225 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Contact Person: Jon C. Brown  Phone: ( 214 ) 219-8883 Fax: ( 214 ) 219-8886	N2 Section 36 & S2NW4 of Section 25			
Phone: ( 214 ) 213-0003 Fax: ( 214 ) 210-0003				
Email Address:				
Surface Owner Information:				
Name: Koester Brothers	When filing a Form T-1 involving multiple surface owners, attach an additional			
Address 3: 1212 NE 20TH AVENUE	sheet listing all of the information to the left for each surface owner. Surface			
Address 2:	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.			
City: HOISINGTON State: KS Zip: 67544 +				
	k batteries, pipelines, and electrical lines. The locations shown on the plat In the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, as I have not provided this information to the surface owner(s). I as KCC will be required to send this information to the surface owner.	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this nd email address.  cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and			
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.			
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.			
9/29/2014	Secretary/Treasurer			
Date: Signature of Operator or Agent:	Title:			
	Received KANSAS CORPORATION COMMISSION			