### 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:	nitted with this form.		
Oil Lease: No. of Oil Wells 1 **	Effective Date of Transfer: 01/01/2015		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.:		
Gas Gathering System:	Lease Name: Adams Ranch		
Saltwater Disposal Well - Permit No.:	Approximation to constitutions the Co. Approximation of the Co. Approxi		
Spot Location: feet from N / S Line feet from E / W Line	Legal Description of Lease: ALL SEC 13,T35S, R29		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: Meade		
Number of Injection Wells **	Production Zone(s): LANSING-KANSAS CITY		
Field Name: Cimarron Bend	1.100.00 7.0004.00		
** 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 DP Drilling		
Past Operator's License No. 34399/	Contact Person: Gregory S. Roden		
Past Operator's Name & Address: Quantum Resources Management LLC	Phone: 713-634-4612		
1401 McKinney Street, Suite 2400, Houston, TX 77010	Date: 01/09/2015		
Title: Senior VP - Legal			
Tille: Control VI Logar	Signature: Suggery 1 1 Man RECEIVED		
New Operator Liegge No. 35150	KANSAS CORPORATION COMMI		
New Operator's License No.	Contact Person: Jeanie McMillan  713-634-4696		
New Operator's Name & Address: Breitburn Operating LP	Phone: 110 004 4000		
600 Travis St., Suite 4800	Oil / Gas Purchaser: CONSERVATION DIVIS		
Houston, Texas 77002	Date: 01/09/2015		
Title: Regulatory Manager	Signature: Hanie May Millan		
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		
he 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:			
. necommended action.	permitted by No.:		
Date:	Date:		
Date:	Authorized Signature		
DISTRICT EPR /-26-/5" F	PRODUCTION JAN 2 7 2015 UICLAN 2 7 2015		
Mail to: Past Operator New Operator	######################################		

#### Side Two

#### Must Be Filed For All Wells

	A	
KDOR Lease No.:		

* Lease Name:	Adams Ranch		* Location:	Sec. 13-35S-29W	
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)
F-23	15-119-20670	2970 Circle	600 Circle	OIL	PR
		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		
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		FSL/FNL _	FEL/FWL _		AN 22 2015
		FSL/FNL	FEL/FWL		SERVATION DIVISION
(0.000000000000000000000000000000000000		FSL/FNL	FEL/FWL	95.11	WICHITA, KS
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
(c)		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL _	FEL/FWL		-
		FSL/FNL	FEL/FWL		
<del></del>		FSL/FNL _	FEL/FWL		

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.

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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.

OPERATOR: License # 35150	Well Location:		
Name: Breitburn Operating LP	S2 SE NE Sec. 13 Twp. 35 S. R. 29 East X West		
Address 1: 600 Travis St., Suite 4800	County: Meade		
Address 2:	Lease Name: Adams Ranch Well #: F-23		
City: Houston State: TX Zip: 77002 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: Jeanie McMillan	the lease below:		
Phone: ( 713 ) 634-4696 Fax: ( 713 ) 634-4697			
Email Address: jeanie.mcmillan@breitburn.com			
RECEIVED KANSAS CORPORATION COMMISSION	l		
Surface Owner Information: Name: JAD RANCH LLC JAN 22 2015	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: C/O JUDY ADAMS CONSERVATION DIVISION WICHITA, KS	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.		
City: SAN BENITO Slate: TX Zip: 78586 +			
are preliminary non-binding estimates. The locations may be entered on to Select one of the following:	he Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be loca CP-1 that I am filing in connection with this form; 2) if the form bei form; and 3) my operator name, address, phone number, fax, and	ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this		
I have not provided this information to the surface owner(s). I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KCO	er(s). To mitigate the additional cost of the KCC performing this the surface owner by filling out the top section of this form and		
	e with this form. If the fee is not received with this form, the KSONA-1		
lf choosing the second option, submit payment of the \$30.00 handling fee form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 w			
	vill be returned.		
form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 we hereby certify that the statements made herein are true and correct to the	vill be returned.		