### 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**	Effective Date of Transfer: 01/01/2015  KS Dept of Revenue Lease No.: 215267		
Gas Lease: No. of Gas Wells 1 **			
Gas Gathering System:	Lease Name: Adams Ranch		
Saltwater Disposal Well - Permit No.:	ALL CONTROL OF A CONTROL OF THE SECOND STATE O	5 20	
Spot Location: feet from N / S Line	SE _NW _ SW _ NW _Sec. 9 _Twp35		
feet from E / W Line	Legal Description of Lease: ALL SEC. 9 NORTH O	F CO RD Sec. 9, 1255, R29W	
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: Meade		
Number of Injection Wells**	Production Zone(s): CHESTER LIME		
Field Name: Cimarron Bend			
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.:	feet from N / S Li	ne 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 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		1.	
Title:	Signature: Sugory Min	RECEIVED	
New Operator's License No. 35150	Jeanie McMillan	MANSAS CORPORATION COMMISSION	
New Operator's License No.	Contact Person: Jeanie McMillan	JAN 22 2015	
New Operator's Name & Address: Breitburn Operating LP	Phone: 713-634-4696	30 VOTOS	
600 Travis St., Suite 4800	Oil / Gas Purchaser:	CONSERVATION DIVISION WICHITA, KS	
Houston, Texas 77002	Date: 01/09/2015		
Title: Regulatory Manager	Signature: Hanie McM.	illa	
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 pertain	ns 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 c	ontaining the surface pit	
Permit No.: Recommended action:	permitted by No.:	_	
Date:	Date:		
Date:	Authorize	ed Signature	
DISTRICT EPR 1-26-15	PRODUCTION JAIN 2 7 ZUID UNE	4N 2 / 2013	
Mail to: Past Operator New Operato	orDistrict		

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease	No.: 215267					
* Lease Name:	Adams Ranch		* Location:	* Location: Sec. 9-35S-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-32	15-119-20773	3532 Circle	4632 Circle	GAS	PR	
		FSL/FNL	FEL/FWL	_		
		FSL/FNL	FEL/FWL			
	_	FSL/FNL	FEL/FWL			
W-12		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

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CONSERVATION DIVISION
WICHTA, KS

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 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.

OPERATOR: License # 35150	Well Location:		
Name: Breitburn Operating LP	_NW_SW_NW_Sec. 9 _ Twp. 35 S. R. 29 _ East X Wes		
Address 1: 600 Travis St., Suite 4800	County: Meade		
Address 2:	Lease Name: Adams Ranch Well #: F32		
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	S9, T35,R29,		
Email Address: jeanie.mcmillan@breitburn.com			
RECEIVED KANSAS CORPORATION COMMISSION			
Surface Owner Information: Name: Adams, HG IV & Sons LP	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: 8051 CC Road CONSERVATION DIVISION	sheet listing all of the information to the left for each surface owner. Surfac owner information can be found in the records of the register of deeds for th		
Address 2:	county, and in the real estate property tax records of the county treasurer.		
City: Plains State: KS Zip: 67869 +			
the KCC with a plat showing the predicted locations of lease roads, tank be are preliminary non-binding estimates. The locations may be entered on the Select one of the following:			
Select one of the following:			
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 ng 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 KC.	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		
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 v			
I hereby certify that the statements made herein are true and correct to the			
01/09/2015 Date: Signature of Operator or Agent: Alunce	Me Milla-Title: Regulatory Manager		