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: MUST be submitted	ted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: January 1, 2015
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: Gas -211824/Oil-116082
Gas Gathering System:	Lease Name: Burdette A -1 C NE SE, Burdette A-2 SW NW SE
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from DE / W Line	Legal Description of Lease: Burdette A
Enhanced Recovery Project Permit No.:	SE Section 1-T19S-R8W
Entire Project: Yes No	County: Rice
Number of Injection Wells **	Production Zone(s):
Field Name: Geneseo-Edwards Field	
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	feet from N / S Line of Section feet from E / W Line of Section Haul-Off Workover D Drilling
Past Operator's License No. 34163 /	Contact Person: Kent Strube
Past Operator's Name & Address: Gas Chasers, Inc.	Phone: 620-588-2303
P.O. Box 533, Claflin, KS 67525	Date: 01/28/15 KCC WICHITA
Title: President	Signature: FEB 0 6 2015
	RECEIVED
New Operator's License No. 30931	Contact Person: Matthew Osborn, Vice-President
New Operator's Name & Address: Daystar Petroleum, Inc.	Phone: 620-583-5527
P.O. Box 438, Haysville, KS 67060-0438	Oil / Gas Purchaser: American Energies Pipeline, LLC
	Date: 2/2/15// 0/
Title: Vice-President	Signature:
Acknowledgment of Transfer: The above request for transfer of injection a noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the a	Commission. This acknowledgment of transfer pertains to Kansas Corporation
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.:
Date:	Date:
Date:	Authorized Signature
DISTRICT EPR	PRODUCTION FEB 1 3 2015 FFB 1 3 2015
Mail to: Past Operator New Operato	i i

Must Be Filed For All Wells

Gas -211824/Oil-116082 KDOR Lease No.: Burdette A -1 C NE SE, Burdette A-2 SW NW SE SE/4 Section 1-T19S-R8W, Rice County * Lease Name: * Location: Well No. API No. Type of Well Footage from Section Line Well Status (YR DRLD/PRE '67) (i.e. FSL = Feet from South Line) (Oil/Gas/INJ/WSW) (PROD/TA'D/Abandoned) Circle Circle 15-159-20627 1680 FSL FSL/FNL 660 FEL FEL/FWL Gas **Inactive Gas Well** 1653 FSL FSL/FNL 15-159-21298 Gas Inactive Gas Well 2280 FEL FEL/FWL FSL/FNL FEL/FWL KCC WICHITA FSL/FNL FEL/FWL FEB 0 6 2015 FSL/FNL FEL/FWL RECEIVED FSL/FNL FEL/FWL FSL/FNL FEL/FWL

A separate sheet may be attached if necessary

^{*} 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 2010
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 # 30931	Well Location:
Name: Daystar Petroleum, Inc.	<u>SE</u> Sec. 1 Twp. 19S S. R. 8 East 🗷 West
Address 1: P.O. Box 560	County: Rice County, KS
Address 2:	Lease Name: Burdette A Well #: #1, #2
City: Eureka State: KS Zin: 67060	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Contact Person: Matthew Osborne, Vice-President	
Contact Person: Matthew Osborne, Vice-President Phone: (620) 583-5527 Fax: (620) 583-5536	
Email Address:	
KCC WICHITA	1
Surface Owner Information: Name: Bar-K-Bar Investments FEB () 6 2015	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.
Name: Bar-K-Bar Investments Address 1: c/o Kenneth Knight Address 2: 1925 Avenue "M"	
Address 2: 1925 Avenue "M"	
City: Lyons State: KS Zip: 67554 +	,
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathod the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on	batteries, pipelines, and electrical lines. The locations shown on the plat
Select one of the following:	
☑ I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be loce CP-1 that I am filling in connection with this form; 2) if the form beform; and 3) my operator name, address, phone number, fax, and I will be connected to the connection with this form; 2 if the form beform; and 3 my operator name, address, phone number, fax, and I will be connected to the co	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing 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 ack KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling for	ner(s). To mitigate the additional cost of the KCC performing this
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-1	ee with this form. If the fee is not received with this form, the KSONA-1 will be returned.