KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

030115_Harmon.pdf

on.pdf
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:	nitea with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 3/1/2015		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 100206		
Gas Gathering System:	Lease Name: Harmon		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	<u>E2 _ SW Sec. 18 Twp. 32 R. 13</u> F W		
feet from E / W Line	Legal Description of Lease: E2 SW4 Sec 18-32S-13E		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: Chautauqua Production Zone(s): Wayside		
Number of Injection Wells **			
Field Name: Hale-Inge			
** 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 Of Drilling		
Past Operator's License No	Contact Person: Todd Miller		
Past Operator's Name & Address: Todd Miller dba	Phone: 620-725-3631		
Speedy Well Service 402 W. Elm St Sedan, KS 67361	Date: 4/15/2015		
Title: operator			
Title:	Signature: Codd (sllv		
New Operator's License No. 34301 /	Contact Person: Kyler Finney		
New Operator's Name & Address: Kyler Finney dba	Phone: 918-440-8878 Received KANSAS CORPORATION COMMISSIO		
Finney Oil Company P.O. Box 87 Wann, OK 74083	Oil / Gas Purchaser: Coffeyville Resources APR 2 0 2015		
	4-16-15		
operator	Date: Conservation Division WICHITA, KS		
Title: operator	Signature:		
Acknowledgment of Transfer: The above request for transfer of injection	n authorization, surface pit permit # has been		
noted, approved and duly recorded in the records of the Kansas Corporation	n Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the	e 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.:		
, resommended action.	portiniod by 110.1		
Date:	Date:		
Date: Authorized Signature	Authorized Signature		
DISTRICT EPR4-27-15	PRODUCTION 4.28.15 UIC 4-28-15		
Mail to: Past Operator New Opera			

Side Two

Must Be Filed For All Wells

* Lease Name: Harmon		* Location: E2 SW4 Sec 18-32-13E			
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)
7	15-019-21264	880 (FSDFNL	3520 FELFWL	oil	prod
8	15-019-21781	500 FSI/FNL	3500 FEDFWL	oil	prod
	_	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	<u> </u>	
		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		Received KANSAS CORPORATION COMMISSION
		FSL/FNL	FEL/FWL	**************************************	APR 2 0 2015
		FSL/FNL	FEL/FWL		- CONSERVATION DIVISION
		FSL/FNL	FEL/FWL		WICHITA, KS
		FSL/FNL	FEL/FWL		
	-	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 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) X T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License # 32933				
Name: Todd Miller dba Speedy Well Service	Well Location:			
	Sec. 18 Twp. 32 S. R. 13 X East West			
Address 1: 402 W. Elm St	County: Chautauqua			
Address 2:	Lease Name: Harmon Well #:			
City: Sedan State: KS Zip: 67361 + Contact Person: Todd Miller	If filing a Form T-1 for multiple wells on a lease, enter the legal description of			
	the lease below: E2 SW4 Sec 18-32S-13E			
Phone: (<u>620</u>) <u>725-3631</u> Fax: ()				
Email Address:				
Received Received	SSION			
Surface Owner Information: Name: Larry Brown Address 1: P.O. Box 387 Address 2: City: Waldron State: AR Zip: 72958 + Corporation commission Received APR 20 2015 Apr 20				
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and a 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. ct (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 lo	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			
KCC will be required to send this information to the surface ow	cknowledge that, because I have not provided this information, the mer(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 CCC, which is enclosed with this form.			
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	fee with this form. If the fee is not received with this form, the KSONA-1 1 will be returned.			
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.			
A/4E/004E	0 0 1 01			
Date: Signature of Operator or Agent:	Title:			