KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1 032715_Beverly.pdf July 2014 Form must be Typed July 2014 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,

Check Applicable Boxes:	MUST be submitted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 3/27/2015
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 141136
Gas Gathering System:	[· ·
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N /	S LineSENENW_Sec12 _Twp24S_ R10 EW
feet from E /	W Line Legal Description of Lease: N/2 Sec. 12-T24S-R10W
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Reno
Number of Injection Wells **	Production Zone(s): Mississippian
Field Name: Highway 50	Injection Zone(s):
** Side Two Must Be Completed.	injection zone(s).
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section
Type of Pit: Emergency Burn So	ettling Haul-Off Workover DR Drilling
Past Operator's License No. 34715/	Contact Person: Stephen T. Harpham
Past Operator's Name & Address:Dorado E&P Partners,	, LLC Phone: 720-402-3700
1401 17th St #1100, Denver, CO 80202	Date: 3-26-2015
Title: Executive VP - Engineering	Signature: Starting Laylor
New Operator's License No. 34192 /	Contact Person: Spence Laird Received KANSAS CORPORATION COMMISSION
New Operator's Name & Address:	Phone: 405-429-6518 APR 2 1 2015
SandRidge Exploration and Production	Oil / Gas Purchaser: NCRA / American Energies
123 Robert S Kerr Ave, Oklahoma City, OK 73102	Date: 4/17/15 CONSERVATION DIVISION WICHITA, KS
Title: Regulatory Supervisor	Signature: Spuf kin
•	sfer of injection authorization, surface pit permit # has been sas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation p interest in the above injection well(s) or pit permit.
is ack	nowledged as is acknowledged as
the new operator and may continue to inject fluids as a	authorized by the new operator of the above named lease containing the surface pit
Permit No.: Recommended action:	permitted by No.:
Date: Authorized Signature	Date:
DISTRICT EPR	29-15 PRODUCTION APR 3 0 2015 APR 3 0 2015
Mail to: Past Operator	New Operator District

Side Two

Must Be Filed For All Wells

KDOR Lease I	No.: 141136				
* Lease Name: Beverly		* Location: SE NW NW 12-T24S-R10W			
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	<u>15-155-21310-0001</u>	4290 FSDFNL	2970 FED FWL	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		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		·
		FSL/FNL	FEL/FWL		
				KANSA	Pecaived
					APR 2 1 2015
					NSERVATION DIVISION
					HIMITA, IX
		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 (Ca	uthodic Protection Borehole Intent)		
OPERATOR: License # 34192	Well Location:		
Name: SandRidge Exploration and Production, LLC	SE_NE_NW Sec. 12 Twp. 24 S. R. 10 East West		
Address 1: 123 Robert S. Kerr Ave			
Address 2:	County: Reno Lease Name: Beverly Well #: 1		
City: Oklahoma City State: OK Zip: 73102 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Contact Person: Spence Laird			
Contact Person: Spence Laird Phone: (405) 429-6518 Fax: ()			
Email Address:			
Received Received KANSAS CORPORATION COMMISSION			
Reverly D. Miller Living Trust APR 2 1 2013	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: C/O First National Bank CONSERVATION DIVISION Address 2: P.O. Box 913	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.		
Address 2: P.O. Box 913			
City: Hutchinson State: KS Zip: 67504 +			
Oily State Zip			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic 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:	patteries, pipelines, and electrical lines. The locations shown on the plat		
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 loc 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, and	eated: 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 must provide the name and address o 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 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 fe form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1			
I hereby certify that the statements made herein are true and correct to the	ne best of my knowledge and belief.		
Date: 3/26/2015 Signature of Operator or Agent: Auron /	Aaron Reyna, SVP Appraisal & NV		