

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

110114_Harra_INJ.pdf

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:

- ☒ Oil Lease: No. of Oil Wells 11 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☒ Enhanced Recovery Project Permit No.: E-20,671
- Entire Project: ☒ Yes ☐ No
- Number of Injection Wells 4 **

Field Name: Paola - Rantoul

**** Side Two Must Be Completed.**

Effective Date of Transfer: November 1, 2014

KS Dept of Revenue Lease No.: 114837 ✓

Lease Name: Harra

_____ NW Sec. 13S Twp. 17 R. 22 ☒ E ☐ W

Legal Description of Lease: NW/4 of 13-17S-22E

County: Miami

Production Zone(s): Peru

Injection Zone(s): Peru Callheman

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover dr ☐ Drilling

Past Operator's License No. 6142 /

Past Operator's Name & Address: Town Oil Company, Inc.

16205 W. 287th St. Paola, KS 66071

Title: President

Contact Person: Lester Town

Phone: 913-294-2125

Date: March 30, 2015

Signature: Lester Town

New Operator's License No. 34592 ✓

New Operator's Name & Address: Kansas Resource Exploration & Development, LLC

9393 W. 110th St. Ste 500 Overland Park, KS 66210

Title: Chief Operating Officer

Contact Person: Brad Kramer

Phone: 913-451-6758

Oil / Gas Purchaser: Coffeyville Resources

Date: March 30, 2015

Signature: JK

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APR 06 2015

CONSERVATION DIVISION
WICHITA, KS

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.

Kansas Resource Exploration & Development LLC is acknowledged as

the new operator and may continue to inject fluids as authorized by

Permit No.: E-20.671 Recommended action: None

Date: 5-26-15

Authorized Signature

_____ is acknowledged as

the new operator of the above named lease containing the surface pit

permitted by No.: _____

Date: _____

Authorized Signature

DISTRICT _____ EPR 5-20-15 PRODUCTION 5-22-15 UIC 5-26-15
Mail to: Past Operator 5-26-15 New Operator 5-26-15 District (3) 5-26-15

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

* Location: NW/4 of 13-17S-22E

CONSERVATION DIVISION
WICHITA, KS.

* 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

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1
July 2010
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 6142
Name: Town Oil Company, Inc.
Address 1: 16205 W. 287th St.
Address 2: _____
City: Paola State: KS Zip: 66701 + _____
Contact Person: Lester Town
Phone: (913) 294-2125 Fax: (_____) _____
Email Address: _____

Well Location:
_____-_____-NW Sec. 13 Twp. 17 S. R. 22 ☒ East ☐ West
County: Miami
Lease Name: Harra Well #: All

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

NW/4 of 13-17S-22E

Surface Owner Information:

Name: Michael L. Harra
Address 1: 30585 Osawatomie Road
Address 2: _____
City: Paola State: KS Zip: 66071 + _____

Received
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APR 06 2015

CONSERVATION DIVISION
WICHITA, KS

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.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (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 located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 3-30-15 Signature of Operator or Agent: Lester Town Title: President

1/4 SEC 13, T17S, R22E
T17S, R22E, NW 1/4, SEC 13

N. LINE SEC 13

COUNTY ROAD

SIVISHER LEASE

REC

NW 1/4

CHAPMAN LEASE

176.32
1421°

275.2°

T17S, R22E, NW 1/4, SEC 13
1223.64

COUNTY RD
N. LINE SEC 13

625.24

250.2

100

100

100

100

100

100

W3 1068²

1059¹
Dry

1045⁵
Dry

25 1067²

24 1056³

20 1061⁵

15 1039⁶

15 1065⁶

14 1055²

1043²
Dry

1035⁴
Dry

1038⁶
Dry

10 1066²

9 1061²

8 1058²

7 1051²

6 1085¹

5 1062¹

4 1061²

3 1062²

2 1048²

1 1027⁵