

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form T-1
July 2014

010108_Curry.pdf

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 2 **
- ☐ 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.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: _____

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

Effective Date of Transfer: January 1, 2008

KS Dept of Revenue Lease No.: Well #1 129608 Well #3 130216

Lease Name: Curry

_____ - _____ NW - SE Sec. 31 Twp. 16 R. 24 ☐ E ☒ W

Legal Description of Lease: SE/4

County: Ness

Production Zone(s): Mississippi

Injection Zone(s): _____

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

_____ feet from ☐ N / ☐ S Line of Section

_____ feet from ☐ E / ☐ W Line of Section

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

Past Operator's License No. 8061

Past Operator's Name & Address: Oil Producers, Inc. of Kansas
1710 Waterfront Parkway, Wichita, KS 67206

Title: COO

Contact Person: Melody C. Fletcher

Phone: 316-681-0231

Date: July 10, 2015

Signature: [Signature] CONSERVATION DIVISION
WICHITA, KS

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KANSAS CORPORATION COMMISSION

JUL 22 2015

New Operator's License No. 335934

New Operator's Name & Address: Barracuda Operating Co.
P.O. Box 405

Ness City, KS 67560

Title: President

Contact Person: Brian Gabel

Phone: 785-798-3122

Oil / Gas Purchaser: _____

Date: 7-20-15

Signature: [Signature]

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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ . Recommended action: _____

Date: _____
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 7-29-15 PRODUCTION 7-30-15 UIC 7-30-15
Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: Curry

* Location: SE/4 Sec. 31-16S-24W Ness Co, KS

Received
KANSAS CORPORATION COMMISSION

~~JUL 22 2015~~

~~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

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

OPERATOR: License # 8061
Name: Oil Proudcers, Inc. of Kansas
Address 1: 1710 Waterfront Parkway
Address 2: _____
City: Wichita State: KS Zip: 67206 + 6603
Contact Person: Melody C. Fletcher
Phone: (316) 681-0231 Fax: (316) 682-3136
Email Address: _____

Well Location:
_____ SE Sec. 31 Twp. 16 S. R. 24 ☐ East ☒ West
County: Ness County
Lease Name: Curry Well #: _____

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Well #1 NW NW SE
Well #3 SE NW SE

Surface Owner Information:

Name: Dubbs Farms
Address 1: Attn: Zantha LaFon Warth
Address 2: P.O. Box 253
City: Marine On Saint Croix State: MI Zip: 55047 + _____

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 must provide the name and address of the surface owner by filling out the top section of this form and 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: 7/10/15 Signature of Operator or Agent: [Signature] Title: COO

Received
KANSAS CORPORATION COMMISSION

JUL 22 2015

CONSERVATION DIVISION
WICHITA, KS

**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 1 **
☐ 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.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: _____

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

Effective Date of Transfer: 12-26-2013 * 7/2/14

* Op. 7/28/15
KS Dept of Revenue Lease No.: 103343 ✓

Lease Name: ZIEGENBUSH

SE - NE - NW - NW Sec. 23 Twp. 19 R. 11 ☐ E ☒ W

Legal Description of Lease: _____

SE NE NW NW/4 NCRA #70170

County: BARTON

Production Zone(s): _____

Injection Zone(s): _____

KCC WICHITA

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Surface Pit Permit No.: 15-009-04511-0000

(API No. if Drill Pit, WO or Haul)

4947 feet from ☐ N / ☒ S Line of Section

4267 feet from ☒ E / ☐ W Line of Section

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

Past Operator's License No. 6496 ✓

Past Operator's Name & Address: FAYE E. STEPHENS TRUST

Title: Trustee

Contact Person: Ira Stephens III

Phone: 620-439-5681

Date: 7-24-2015

Signature: Ira Stephens III
Assignment Attached

New Operator's License No. 35103 ✓

New Operator's Name & Address: _____

I & M OIL PRODUCTION, LLC

33117 SE 800 ROAD, KINCAID, KS 66039

Title: New Operator

Contact Person: NANCY MILLER

Phone: 913-795-2916

Oil / Gas Purchaser: National Cooperative Refinery Assoc

Date: 7-24-2015

Signature: Ira Stephens III

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 15-009-04511-0000 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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____. Recommended action: _____

Date: _____

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 7-29-15 PRODUCTION 7.30.15 UIC 7-30-15

Mail to: Past Operator _____ New Operator _____ District _____

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1
July 2014
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 # 35103
Name: I & M OIL PRODUCTION, LLC
Address 1: 33117 SE 800 ROAD
Address 2: _____
City: KINCAID State: KS Zip: 66039 + _____
Contact Person: IRA STEPHENS III
Phone: (785) 448-8302 Fax: (_____) _____
Email Address: _____

Well Location:
SE NE NW Sec. 23 Twp. 19 S. R. 11 ☐ East ☒ West
County: BARTON
Lease Name: ZIEGENBUSH Well #: 1

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

Surface Owner Information:

Name: I & M OIL PRODUCTION, LLC
Address 1: 33117 SE 800 ROAD
Address 2: _____
City: KINCAID State: KS Zip: 66039 + _____

KCC WICHITA
JUL 27 2015
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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.

(See attached for additional)

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:

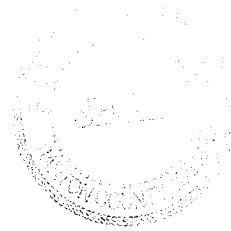
- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with 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 must provide the name and address of the surface owner by filling out the top section of this form and 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: 7-24-2015 Signature of Operator or Agent: Fancy Miller Title: Agent

COPY



Index _____
Numerical 91
Cross W+2
DC Book _____
Plat Book _____
Military Book _____
Art of Inc Book _____
Scanned _____

ASSIGNMENT OF OIL AND GAS LEASE

KNOW ALL MEN BY THESE PRESENTS: That the undersigned, Ira Stephens, III, Trustee of the Faye M. Stephens Trust, dated December 11, 2007, hereinafter called "Assignor", for and in consideration of One Dollar (\$1.00) and other valuable consideration, the receipt of which is hereby acknowledged, do hereby sell, assign, transfer and set over unto I & M Oil Production, LLC, a Kansas Limited Liability Company, hereinafter called "Assignee", all right, title, and interest in and to the oil and gas lease dated November 28, 1950, from Emma Vogelsang and Emil Vogelsang, her husband; Henry H. Ziegenbusch and Catherine Ziegenbusch, his wife; Lessor, to Alpine Oil & Royalty Co., Inc., Lessee, recorded in Book 146, Page 354, insofar as said lease covers the following described land in the County of Barton, State of Kansas, to-wit:

The Northwest Quarter (NW 1/4) of Section Twenty-three (23), Township Nineteen (19) South, Range Eleven (11) West, Barton, County, Kansas.

And for the same consideration, the Assignor covenants with the Assignee, its successors and assigns; that the Assignor is the lawful owner of and has good title to the interest above assigned in and to said lease, estate, rights and property, free and clear from all liens, encumbrances or adverse claims; that said Lease is a valid and subsisting lease on the land above

KCC WICHITA

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-2-

described, and all rentals and royalties due thereunder have been paid and all conditions necessary to keep the same in full force have been duly performed, and that the Assignor will warrant and forever defend the same against all persons whomsoever, lawfully claiming or to claim the same.

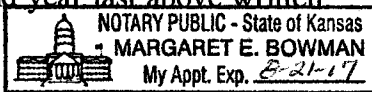
EXECUTED this 20th day of December, 2013.

Ira Stephens III
Ira Stephens, III
Trustee of the Faye M. Stephens Trust
Dated December 11, 2007

STATE OF KANSAS, COUNTY OF MIAMI, ss:

Before me, the undersigned, a Notary Public, within and for said County and State, on this 20th day of December, 2013, personally appeared Ira Stephens, III, Trustee of the Faye M. Stephens Trust, dated December 11, 2007, to me personally known to be the identical person who executed the within and foregoing instrument and acknowledged to me that he executed the same as his free and voluntary act and deed for the uses and purposes therein set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal the date and year last above written



Margaret E. Bowman
Notary Public

My appointment expires: 8-21-17

Pursuant to K.S.A. 79-1437e, a real estate sales validation questionnaire is not required due to Exemption No. 7.

KCC WICHITA
JUL 27 2015
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KANSAS CORPORATION COMMISSION 063015_Naylor.pdf
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:

- ☒ Oil Lease: No. of Oil Wells 10 **
☐ 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.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: PAOLA RANTOUL

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

Effective Date of Transfer: 6/30/2015

KS Dept of Revenue Lease No.: 115364 ✓

Lease Name: NAYLOR

_____ Sec. 8 Twp. 16 R. 21 ☒ E ☐ W

Legal Description of Lease: THE S/2 OF NE/4 AND N/2 SE/4

SEC 8, TWP 16, RNG 21E

County: FRANKLIN

Production Zone(s): SQUIRREL

Injection Zone(s): _____

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

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling

☐ Haul-Off ☐ Workover ☒ Drilling

Past Operator's License No. 5353 Exp 6/30/15

Contact Person: BESSIE BLOOMER

Past Operator's Name & Address: BLOOMER WELL SERVICE
2926 VERMONT RD, RANTOUL, KS 66079

Phone: 785-878-3497

Date: 7/13/2015

Title: DECEASED

Signature: Bessie Bloomer

New Operator's License No. 35209

Contact Person: BESSIE BLOOMER

KCC WICHITA

New Operator's Name & Address: DON C & BESSIE BLOOMER REV
LIVING TRUST, 2926 VERMONT RD
RANTOUL, KS 66079

Phone: 785-878-3497

JUL 27 2015

Oil / Gas Purchaser: PACER

RECEIVED

Date: 7/13/2015

Title: OPERATOR

Signature: Bessie Bloomer

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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ . Recommended action: _____

Date: _____
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 7-29-15 PRODUCTION 7-30-15 UIC 7-30-15
Mail to: Past Operator _____ New Operator _____ District _____

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

* Location: S/2 OF NE/4 AND N/2 SE/4 SEC. 8, TWP. 16 RNG 21E

RECEIVED

* 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 # 35209
Name: DON C & BESSIE BLOOMER REV LIVING TRUST
Address 1: 2926 VERMONT RD
Address 2: _____
City: RANTOUL State: KS Zip: 66079 + _____
Contact Person: BESSIE BLOOMER
Phone: (785) 878-3497 Fax: (_____) _____
Email Address: _____

Well Location:
_____ Sec. 8 Twp. 16 S. R. 21 ☒ East ☐ West
County: FRANKLIN
Lease Name: NAYLOR Well #: _____

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

S/2 NE/4 AND N/2 SE/4 8-16-21E

Surface Owner Information:

Name: DON C & BESSIE BLOOMER REV LIVING TRUST
Address 1: 2926 VERMONT RD
Address 2: _____
City: RANTOUL State: KS Zip: ~66079 + _____

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.

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- ☒ 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: 7/13/2015 Signature of Operator or Agent: Bessie Bloomer Title: OPERATOR

KCC WICHITA
JUL 27 2015
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**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 9 **
☐ 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.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: PAOLA RANTOUL

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

Effective Date of Transfer: 6/30/2015
KS Dept of Revenue Lease No.: 112996 ✓
Lease Name: GOOD-FISHER
_____ NW Sec. 5 Twp. 17 R. 21 ☒ E ☐ W
Legal Description of Lease: E/2 NW/4 AND SW/4 OF NW/4
SEC 5 TWP 17 RNG 21E
County: FRANKLIN
Production Zone(s): SQUIRREL
Injection Zone(s): _____

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

_____ feet from ☐ N / ☐ S Line of Section
_____ feet from ☐ E / ☐ W Line of Section

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

Past Operator's License No. 5353 ✓
Past Operator's Name & Address: BLOOMER WELL SERVICE
2926 VERMONT RD, RANTOUL, KS 66079
Title: DECEASED

Contact Person: BESSIE BLOOMER

Phone: 785-878-3497

Date: 7/13/2015

Signature: Bessie Bloomer (Trustee)

All doc. on file

New Operator's License No. 35209 /
New Operator's Name & Address: DON C & BESSIE BLOOMER REV
LIVING TRUST, 2926 VERMONT RD
RANTOUL, KS 66079
Title: OPERATOR

Contact Person: BESSIE BLOOMER

Phone: 785-878-3497

Oil / Gas Purchaser: PACER

Date: 7/13/2015

Signature: Bessie Bloomer

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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____. Recommended action: _____
Date: _____
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 7-29-15 PRODUCTION 7.30.15 UIC 7-30-15
Mail to: Past Operator _____ New Operator _____ District _____

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

* Location: E/2 NW/4 AND SW/4 OF NW/4 SEC 5, TWP 17, RNG 21E

KCC WICHITA
JUL 27 2015
RECEIVED

* 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 # 35209
Name: DON C & BESSIE BLOOMER REV LIVING TRUST
Address 1: 2926 VERMONT RD
Address 2: _____
City: RANTOUL State: KS Zip: 66079 + _____
Contact Person: Bessie Bloomer
Phone: (785) 878-3497 Fax: (_____) _____
Email Address: _____

Well Location: _____
_____ NW Sec. 5 Twp. 17 S. R. 21 ☒ East ☐ West
County: FRANKLIN
Lease Name: GOOD-FISHER Well #: _____

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

E/2 NW/4 AND SW/4 NW/4 5-17-21E

Surface Owner Information:

Name: DON C & BESSIE BLOOMER REV LIVING TRUST
Address 1: 2926 VERMONT ROAD
Address 2: _____
City: RANTOUL State: KS Zip: ~66079 + _____

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: 7/13/2015 Signature of Operator or Agent: Bessie Bloomer Title: OPERATOR

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISIONForm must be Typed
Form must be Signed
All blanks must be FilledREQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION OR SURFACE PIT PERMITForm 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 1 **

☐ 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.: _____

Entire Project: ☐ Yes ☐ No

Number of Injection Wells _____ **

Field Name: Lindsborg

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

Effective Date of Transfer: 06/30/2015

KS Dept of Revenue Lease No.: 1044864349 *NA*

Lease Name: Hudson

E2 - W2 - NE - NW Sec. 9 Twp. 17S R. 3 ☐ E ☒ W

Legal Description of Lease: NW/4 of Sec. 9-Twp.17S-Rng. 3W
McPherson County, Kansas, less two tracts totaling 15.5 acres

County: McPherson

Production Zone(s): Maquoketa

Injection Zone(s): _____

Surface Pit Permit No.: 15-113-21371-00-00
(API No. if Drill Pit, WO or Haul)

660 feet from ☒ N / ☐ S Line of Section
1654 feet from ☐ E / ☒ W Line of Section

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

Past Operator's License No. 35023 ✓

Past Operator's Name & Address: Torchlight Energy Operating, LLC
5700 Plano Parkway, Ste. 3600, Plano TX 75093

Title: Chief Operating Officer

Contact Person: Willard McAndrew

Phone: 214-432-8002

Date: 06/30/2015

Signature: *Willard McAndrew*

New Operator's License No. 32062 ✓

New Operator's Name & Address: ARDC, Inc.
108 W 34th St., Hays, KS 67601

Title: President

Contact Person: Greg Whitehair

Phone: 785-625-6588

Oil / Gas Purchaser: _____

Date: July 22 2015

Signature: *Greg Whitehair*

KCC WICHITA

JUL 27 2015

RECEIVED

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 15-113-21371-00-00 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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ . Recommended action: _____
Date: _____
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 7-29-15 PRODUCTION 7-30-15 UIC 7-30-15
Mail to: Past Operator _____ New Operator _____ District _____

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

Must Be Filed For All Wells

* Location: NW Sec. 9-Twp. 17S-Rng. 3W

KCC WICHITA
JUL 27 2015
RECEIVED

* 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 # 35023
Name: Torchlight Energy Operating, LLC
Address 1: 5700 PLANO PKWY
Address 2: SUITE 3600
City: PLANO State: TX Zip: 75093 + _____
Contact Person: Willard McAndrew
Phone: (214) 432-8002 Fax: (_____) _____
Email Address: will@torchlightenergy.com

Well Location:
E2 W2 NE NW Sec. 9 Twp. 17 S. R. 3 ☐ East ☒ West
County: McPherson
Lease Name: Hudson Well #: 9-1T

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

KCC WICHITA
JUL 27 2015

RECEIVED

Surface Owner Information:

Name: Billy C. & Carole A. Hudson
Address 1: PO Box 271
Address 2: _____
City: Lindsborg State: KS Zip: 67456 + _____

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: 6/30/2015 Signature of Operator or Agent: Willard McAndrew Title: COO

KANSAS CORPORATION COMMISSION 063015_Toll.pdf
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:

- ☒ Oil Lease: No. of Oil Wells 1 **
☐ 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.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: Lindsborg

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

Effective Date of Transfer: 06/30/2015

KS Dept of Revenue Lease No.: 1044864348 NA

Lease Name: Toll

NE NE NE Sec. 30 Twp. 17S R. 3 ☐ E ☒ W

Legal Description of Lease: N/2 NE/4 of Sec. 30-Twp. 17S-Rng 3W

McPherson County, Kansas.

County: McPherson

Production Zone(s): Maquoketa

Injection Zone(s): _____

Surface Pit Permit No.: 15-113-21370-00-00
(API No. if Drill Pit, WO or Haul)

330 feet from ☒ N / ☐ S Line of Section

330 feet from ☒ E / ☐ W Line of Section

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

Past Operator's License No. 35023 ✓

Contact Person: Willard McAndrew

Past Operator's Name & Address: Torchlight Energy Operating, LLC
5700 Plano Parkway, Ste. 3600, Plano TX 75093

Phone: 214-432-8002

Date: 06/30/2015

Title: Chief Operating Officer

Signature: Willard McAndrew, COO

New Operator's License No. 32062 ✓

Contact Person: Greg Whitehair

New Operator's Name & Address: ARDC, Inc.
108 W 34th St., Hays, KS 67601

Phone: 785-625-6588

Oil / Gas Purchaser: _____

Date: July 22 2015

Title: President

Signature: Greg Whitehair

KCC WICHITA

JUL 27 2015

RECEIVED

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 15-113-21370-00-00 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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____. Recommended action: _____
Date: _____
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 7-29-15 PRODUCTION 7-30-15 UIC 7-30-15
Mail to: Past Operator _____ New Operator _____ District _____

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

* Lease Name: Toll * Location: N/2 NE Sec. 30-Twp. 17S-Rng. 3W

KCC WICHITA
JUL 27 2015
RECEIVED

* 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 # 35023
Name: Torchlight Energy Operating, LLC
Address 1: 5700 PLANO PKWY
Address 2: SUITE 3600
City: PLANO State: TX Zip: 75093 + _____
Contact Person: Willard McAndrew
Phone: (214) 432-8002 Fax: (_____) _____
Email Address: will@torchlightenergy.com

Well Location:
NE NE NE Sec. 30 Twp. 17 S. R. 3 ☐ East ☒ West
County: McPherson
Lease Name: Toll Well #: 30-1T

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

Surface Owner Information:

Name: Thomas & Kathryn Toll, JT's
Address 1: 2453 10th Avenue
Address 2: _____
City: Lindsborg State: KS Zip: 67456 + _____

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: 6/30/2015 Signature of Operator or Agent: Willard McAndrew Title: COO

KCC WICHITA

JUL 27 2015

RECEIVED

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:

- ☒ Oil Lease: No. of Oil Wells 1 **
- ☐ 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.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: _____

**** Side Two Must Be Completed.**Effective Date of Transfer: 06/30/2015KS Dept of Revenue Lease No.: 1044862826 *NR*Lease Name: Evans_____ SW - SE Sec. 30 Twp. 17S R. 3 ☐ E ☒ WLegal Description of Lease: S/2 SE/4 of Section 30-17S-3W McPhersonCounty, KS, less a 5 acre tractCounty: McPhersonProduction Zone(s): Maquoketa

Injection Zone(s): _____

Surface Pit Permit No.: 15-113-21369-00-00
(API No. if Drill Pit, WO or Haul)660 feet from ☐ N / ☒ S Line of Section1980 feet from ☒ E / ☐ W Line of SectionType of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover *OK* ☒ DrillingPast Operator's License No. 35023 ✓Past Operator's Name & Address: Torchlight Energy Operating, LLC
5700 Plano Parkway, Ste. 3600, Plano TX 75093Title: Chief Operating OfficerContact Person: Willard McAndrewPhone: 214-432-8002Date: 06/30/2015Signature: *Willard McAndrew, LLC***KCC WICHITA****JUL 27 2015****RECEIVED**New Operator's License No. 32062 ✓New Operator's Name & Address: ARDC, Inc.
108 W 34th St., Hays, KS 67601Title: PresidentContact Person: Greg WhitehairPhone: 785-625-6588

Oil / Gas Purchaser: _____

Date: July 22nd 2015Signature: *Greg Whitehair*

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 15-113-21369-00-00 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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ Recommended action: _____
Date: _____
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 7-29-15 PRODUCTION 7-30-15 UIC 7-30-15
Mail to: Past Operator _____ New Operator _____ District _____

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

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 # 35023
Name: Torchlight Energy Operating, LLC
Address 1: 5700 PLANO PKWY
Address 2: SUITE 3600
City: PLANO State: TX Zip: 75093 + _____
Contact Person: Willard McAndrew
Phone: (214) 432-8002 Fax: (_____) _____
Email Address: will@torchlightenergy.com

Well Location:
_____ SW SE Sec. 30 Twp. 17 S. R. 3 ☐ East ☒ West
County: McPherson
Lease Name: Evans Well #: 30-1T

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

Surface Owner Information:

Name: Susan E. Evans & Mary K. Evans., JTs
Address 1: PO Box 11
Address 2: _____
City: Lebo State: KS Zip: 66856 + _____

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: 6/30/2015 Signature of Operator or Agent: Will McAndrew Title: COO

KCC WICHITA

JUL 27 2015

RECEIVED

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION**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 1 **

☐ 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.: _____

Entire Project: ☐ Yes ☐ No

Number of Injection Wells _____ **

Field Name: Hoglund

**** Side Two Must Be Completed.**Effective Date of Transfer: 06/30/2015KS Dept of Revenue Lease No.: 1044873767 NALease Name: HudsonNE SW Sec. 4 Twp. 17S R. 3 ☐ E ☒ WLegal Description of Lease: SW/4 of Sec. 4-Twp.17S-Rng. 3W

McPherson County, Kansas

County: McPhersonProduction Zone(s): Maquoketa

Injection Zone(s): _____

KCC WICHITA**JUL 27 2015****RECEIVED**Surface Pit Permit No.: 15-113-21372-00-00
(API No. if Drill Pit, WO or Haul)1980 feet from ☐ N / ☒ S Line of Section1980 feet from ☐ E / ☒ W Line of SectionType of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☒ DrillingPast Operator's License No. 35023 ✓Past Operator's Name & Address: Torchlight Energy Operating, LLC
5700 Plano Parkway, Ste. 3600, Plano TX 75093Title: Chief Operating OfficerContact Person: Willard McAndrewPhone: 214-432-8002Date: 06/30/2015Signature: Willard McAndrewNew Operator's License No. 32062 ✓New Operator's Name & Address: ARDC, Inc.
108 W 34th St., Hays, KS 67601Title: PresidentContact Person: Greg WhitehairPhone: 785-625-6588

Oil / Gas Purchaser: _____

Date: July 22 2015Signature: Greg Whitehair

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 15-113-21372-00-00 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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ Recommended action: _____

Date: _____

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 7-29-15 PRODUCTION 7-30-15 UIC 7-30-15

Mail to: Past Operator _____ New Operator _____ District _____

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

Must Be Filed For All Wells

NA

* Location: SW Sec. 4-Twp. 17S-Rng. 3W

[illegible]

* 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 # 35023
Name: Torchlight Energy Operating, LLC
Address 1: 5700 PLANO PKWY
Address 2: SUITE 3600
City: PLANO State: TX Zip: 75093 +
Contact Person: Willard McAndrew
Phone: (214) 432-8002 Fax: ()
Email Address: will@torchlightenergy.com

Well Location:
 NE SW Sec. 4 Twp. 17 S. R. 3 ☐ East ☒ West
County: McPherson
Lease Name: Hudson Well #: 4-1T

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

Surface Owner Information:

Name: Billy C. & Carole A. Hudson
Address 1: PO Box 271
Address 2:
City: Lindsborg State: KS Zip: 67456 +

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: 6/30/2015 Signature of Operator or Agent: Willard McAndrew Title: COO

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:

☒ Oil Lease: No. of Oil Wells 1 **

☐ 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.: _____

Entire Project: ☐ Yes ☐ No

Number of Injection Wells _____ **

Field Name: Lindsborg

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

Effective Date of Transfer: 06/30/2015

KS Dept of Revenue Lease No.: 4044005530 *NA*

Lease Name: Hoffman

SW - SE - SW - SE Sec. 25 Twp. 17S R. 4 ☐ E ☒ W

Legal Description of Lease: W/2 SE/4 Sec. 25-Twp. 17S-Rng. 4W

McPherson County, Kansas, less a 4-acre tract

County: McPherson

Production Zone(s): Maquoketa

Injection Zone(s): _____

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

200 feet from ☐ N / ☒ S Line of Section

3315 feet from ☐ E / ☒ W Line of Section

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

KCC WICHITA

Past Operator's License No. 35023 ✓

Past Operator's Name & Address: Torchlight Energy Operating, LLC
5700 Plano Parkway, Ste. 3600, Plano TX 75093

Title: Chief Operating Officer

Contact Person: Willard McAndrew **JUL 27 2015**

Phone: 214-432-8002 **RECEIVED**

Date: 06/30/2015

Signature: Willard McAndrew, COO

New Operator's License No. 32062 ✓

New Operator's Name & Address: ARDC, Inc.
108 W 34th St., Hays, KS 67601

Title: President

Contact Person: Greg Whitehair

Phone: 785-625-6588

Oil / Gas Purchaser: _____

Date: July 22 2015

Signature: Greg Whitehair

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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____. Recommended action: _____

Date: _____
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 7-29-15 PRODUCTION 7-30-15 UIC 7-30-15
Mail to: Past Operator _____ New Operator _____ District _____

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

* Location: W/2 SE Sec. 25-Twp. 17S-Rng.4W

RECEIVED

* 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 # 35023
Name: Torchlight Energy Operating, LLC
Address 1: 5700 PLANO PKWY
Address 2: SUITE 3600
City: PLANO State: TX Zip: 75093 + _____
Contact Person: Willard McAndrew
Phone: (214) 432-8002 Fax: (_____) _____
Email Address: will@torchlightenergy.com

Well Location:
SW SE SW SE Sec. 25 Twp. 17 S. R. 4 ☐ East ☒ West
County: McPherson
Lease Name: Hoffman Well #: 1-25

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

Surface Owner Information:

Name: Christian Hoffman
Address 1: PO Box 288
Address 2: _____
City: Lindsborg State: KS Zip: 67456 + _____

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: 6/30/2015 Signature of Operator or Agent: Willard McAndrew Title: COO **KCC WICHITA**

**JUL 27 2015
RECEIVED**

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:

- ☒ Oil Lease: No. of Oil Wells _____ **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☒ Saltwater Disposal Well - Permit No.: D-28,040
Spot Location: 1141 feet from ☐ N / ☒ S Line
436 feet from ☒ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: Ellis

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

Effective Date of Transfer: 7-1-15

KS Dept of Revenue Lease No.: 135640

Lease Name: Duncan

NE - NE - SW - SE Sec. 35 Twp. 12S R. 21 ☐ E ☒ W

Legal Description of Lease: E/2 Sec. 35-12S-21W

County: Trego

Production Zone(s): Arbuckle

Injection Zone(s): Cedar Hills

KCC WICHITA
JUL 30 2015
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Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

_____ feet from ☐ N / ☐ S Line of Section
_____ feet from ☐ E / ☐ W Line of Section

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

Past Operator's License No. 5135

Past Operator's Name & Address: John O. Farmer, Inc.

P.O. Box 352, Russell, KS 67665

Title: President

Contact Person: John O. Farmer IV

Phone: (785) 483-3144

Date: July 13, 2015

Signature: John O. Farmer IV

New Operator's License No. 32504

New Operator's Name & Address: Blackhawk Production Company

1607 Oakmont Street, Hays, KS 67601

Title: Owner

Contact Person: Aaron J. Werth

Phone: (785) 650-1782

Oil / Gas Purchaser: Plains Marketing

Date: 7-20-15

Signature: Aaron J. Werth

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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ Recommended action: _____
Date: _____
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 _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: Duncan

* Location: E/2 Sec. 35-12S-21W

KCC WICHITA
JUL 30 2015
RECEIVED

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

OPERATOR: License # 5135
Name: John O. Farmer, Inc.
Address 1: 370 West Wichita Avenue
Address 2: P.O. Box 352
City: Russell State: KS Zip: 67665 + 2 6 3 5
Contact Person: Marge Schulte
Phone: (785) 483-3144 Fax: (785) 483-6020
Email Address: marge.schulte@johnofarmer.com

Well Location:
____ - ____ - ____ Sec. 35 Twp. 12 S. R. 21 ☐ East ☒ West
County: Trego
Lease Name: Duncan Well #: 2 SWD

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

E/2 Sec. 35-12S-21W

KCC WICHITA
JUL 30 2015
RECEIVED

Surface Owner Information:

Name: Isabel J. Duncan Revocable Living Trust
Address 1: 15225 North Boswell Boulevard
Address 2: _____
City: Sun City State: AZ Zip: 85351 + 1 9 0 4

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 must provide the name and address of the surface owner by filling out the top section of this form and 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: 7-13-15 Signature of Operator or Agent: John O. Farmer Title: President

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:

- ☒ Oil Lease: No. of Oil Wells 1 **
- ☐ 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.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Bloomer

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

Effective Date of Transfer: 3/1/2014

KS Dept of Revenue Lease No.: 113608

Lease Name: Clair

NE - NW Sec. 4 Twp. 18S R. 10 ☐ E ☒ W

Legal Description of Lease: _____

County: Rice

Production Zone(s): Arbuckle

Injection Zone(s): _____

**KCC WICHITA
JUL 30 2015
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Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

_____ feet from ☐ N / ☐ S Line of Section

_____ feet from ☐ E / ☐ W Line of Section

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

Past Operator's License No. 31504

Contact Person: Kurt Strube

Past Operator's Name & Address: KJS Oil

Phone: 620 793-2046

608 West Park Street, Claflin, KS 67525

Date: 7-28-2015

Title: President

Signature: [Signature]

New Operator's License No. 30458

Contact Person: Lawrence B Miller

New Operator's Name & Address: RJM Oil Company, Inc.

Phone: 620 786-4009

PO Box 256, Claflin, KS 67525

Oil / Gas Purchaser: Coffeyville Resources Refining and Marketing

Date: 7-28-2015

Title: Lawrence B. Miller, Pres

Signature: [Signature]

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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ . Recommended action: _____

Date: _____
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 _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1
July 2014
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 # 30458
Name: RJM Oil Company, Inc.
Address 1: PO Box 256
Address 2: _____
City: Clafin State: KS Zip: 67525 + 0256
Contact Person: Lawrence B. Miller
Phone: (620) 588-3910 Fax: (_____) _____
Email Address: rjmcompany@hbcomm.net

Well Location:
_____ - NE-NW Sec. 4 Twp. 18S R. 10 ☐ East ☒ West
County: Rice
Lease Name: Clair Well #: 1

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

KCC WICHITA
JUL 30 2015
RECEIVED

Surface Owner Information:

Name: Donald and Joy Hoelscher
Address 1: 530 Ave B
Address 2: _____
City: Bushton State: KS Zip: 67427 + _____

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.

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- ☒ 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 must provide the name and address of the surface owner by filling out the top section of this form and 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: 7-28-15 Signature of Operator or Agent: Lawrence B. Miller Title: Pres.