KANSAS CORPORATION COMMISSION 050115_West_Lyons.pdf OIL & GAS CONSERVATION DIVISION

March 2010 Form must be Typed Form must be Signed All blanks must be Filled

Form T-1

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 submit	tted with this form.		
✓ Oil Lease: No. of Oil Wells 1 **	Effective Date of Transfer:		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 232959 ✓		
Gas Gathering System:	Lease Name: WEST LYONS UNIT		
Saltwater Disposal Well - Permit No.:			
Spot Location: 1270 feet from N / 🔀 S Line	<u>F2 - W2 - NE Sec. 20 Twp. 198 R. 8 </u>		
feet from ☐ E / 🗹 W Line	Legal Description of Lease: T19S, R8W, SEC 20: E2 W2 NE		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: RICE		
Number of Injection Wells **	Production Zone(s): KINDERHOOK		
Field Name: LYONS WEST			
** 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 OR Drilling		
Past Operator's License No. 33725 /	Contact Person: JOEL SAUER		
Past Operator's Name & Address: FOUNDATION ENERGY MANAGEMENT, LLC	Phone: 303-244-8113 KCC WICHIT		
16000 DALLAS PARKWAY., SUITE 875, DALLAS, TX 75248	6 /al / le		
	JUN 11 ZOIS		
Title: VICE PRESIDENT	Signature: RECEIVED		
04504			
New Operator's License No. 31504 /	Contact Person: KURT STRUBE		
New Operator's Name & Address: KJS OIL AND GAS, INC.	Phone: (620) 587-3436		
608 WEST PARK STREET	Oil / Gas Purchaser: KELLY L. MACLASKEY OIL		
CLAFLIN, KS 67525	Date: 05/01/15		
Title: PRESIDENT	Signature: Augustus		
Title:	Signature. Man Stall		
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	is acknowledged as		
the new operator and may continue to inject fluids as authorized by	the new operator of the above named lease containing the surface pit		
Permit No.: Recommended action:	permitted by No.:		
Date	Date		
Date: Authorized Signature	Date: Authorized Signature		
DISTRICT FPR 6-17-15			
DISTRICT EPR	PRODUCTION 6. 18.15 UIC 6-18-15		

Side Two

Must Be Filed For All Wells

Lease Name:	WEST LYONS UNIT		* Location:T19S, R8W, SEC 20: E2 W2 NE			
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)	
7-4	15-159-22564 🗸	1270 Circle	1485 Circle	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			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	-01	MICHITA	
		FSL/FNL	FEL/FWL	KCC.	KCC WICH!TA JUN 1 1 2015	
		FSL/FNL	FEL/FWL		ECEIVED	
		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			

A separate sheet may be attached if necessary

^{*} When transferring a unit which consists of more than one lease please file a separate side two for each lease. If a lease covers more than one section please indicate which section each well is located.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).

Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: C-1 (Intent) CB-1 (Ca	thodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 31504	Well Location:		
Name: KJS OIL AND GAS, INC.	E2 _W2_NE Sec. 20 Twp. 19 S. R. 8 East ★ West		
Address 1: 608 WEST PARK STREET	County RICE		
	County: RICE Lease Name: WEST LYONS UNIT If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Address 2: 67525	Lease Name:		
City: State: Zip:+	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Contact Person:	A		
Final Advances kisoilman@hotmail.com			
Address 2: City: CLAFLIN State: KS Zip: 67525 Contact Person: KURT STRUBE Phone: (620) 587-3436 Email Address: kjsoilman@hotmail.com Fax: () Fax: () Surface Owner Information:			
Surface Owner Information: Name: MARGARET E COOK TRUST Address 1: 2931 N GOVERNEOUR, APT 110 Address 2:	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 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 a 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	ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this		
I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own- task, I acknowledge that I am being charged a \$30.00 handling fe	er(s). To mitigate the additional cost of the KCC performing this		
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: 05/01/15 Signature of Operator or Agent:	Title: Westland		