KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

060115_Whitten_A.pdf

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

Authorized Signature

District _

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 2 Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 144275 Gas Gathering System:_ Lease Name: Whitten A Saltwater Disposal Well - Permit No.: ____ _- ___ **52**_ <u>NW_Sec.</u> <u>12_Twp.</u> <u>33 S_R.</u> <u>2___</u> [E / W __ feet from N / S Line Legal Description of Lease: NW Sec. 12, T33S R2W __ feet from 🔲 E / 🔲 W Line Enhanced Recovery Project Permit No.: ___ County: Sumner Entire Project: Yes No Number of Injection Wells _ Production Zone(s): Wilcox, Mississippi Field Name: Perth Field Injection Zone(s):___ ** Side Two Must Be Completed. 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 Workover A Burn Settling Haul-Off Drilling KCC WICHITA 35085 Michael Cederstrom Past Operator's License No. Contact Person: Past Operator's Name & Address: Stratex Oil & Gas Holdings, Inc. Phone: 801-519-8500 RECEIVED 30 Echo Lake Rd., Watertown CT 06795 Date: Title: Executive Vice President Signatur Contact Person: _Michael Cederstrom New Operator's License No. 35193/ New Operator's Name & Address: Stratex Operating, Inc. Phone: 801-519-8500 175 S. Main, Ste 900, Salt Lake City, UT 84111 Oil / Gas Purchaser: Coffeyville **Executive Vice President** Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #_ 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

permitted by No.: _

PRODUCTION _

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

DISTRICT -

Mail to: Past Operator _

. Recommended action:

Authorized Signature

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 144275					
* Lease Name: _	Whitten A		* Location: NW Sec. 12, T33S R2W			
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)	
12-3	<u>15-191-22502-0001</u>	3571 ESL/ENL	3701 (FEL) FWL	Oil	PROD	
12-4	15-191-22757 🗸	2310 FSL FNL	990 FELVFW	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			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	KCC WIG		
	1.7410	FSL/FNL	FEL/FWL	JUN 17		
		FSL/FNL	FEL/FWL	RECEI	VED	
		FSL/FNL	FEL/FWL		444	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			

A separate sheet may be attached if necessary

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

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1 July 2014 Form Must Be Typed Form must be Signed All blanks must be Filled

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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

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

35103			
OPERATOR: License # 35193	Well Location:		
Name: Stratex Operating, Inc. Address 1: 175 S. Main, Ste 900			
	County: Sumner Lease Name: Whitten A Well #: 12-3 & 12-4		
Address 2:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: NW Sec. 12, T33S R2W		
Contact Bargary Jeremiah J. Burton			
Contact Person: Jeremiah J. Burton Phone: (801) 519-8500 Fax: (801) 519-6703			
Email Address: jburton@richfieldoilandgas.com			
KCC WICHITA			
Surface Owner Information: Name: Roger Whitten JUN 17 2015	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.		
Address 1: 1135 Woodlawn Place RECEIVED			
Address 1: 1135 Woodlawn Place RECEIVED Address 2:			
City Oklahoma City State: OK Zie: 73118			
οιαιε Σιρ			
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
☑ I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be loce CP-1 that I am filing in connection with this form; 2) if the form beform; and 3) my operator name, address, phone number, fax, an	cated: 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		
KCC will be required to send this information to the surface owr	knowledge that, because I have not provided this information, the ner(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 CC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	ee with this form. If the fee is not received with this form, the KSONA-1 will be returned.		
I hereby certify that the statements made herein are true and correct to to Date: Signature of Operator or Agent: Signature of Operator o	the best of my knowledge and belief. Geologist Title:		