KANSAS CORPORATION COMMISSION Q40102_Bradshaw.pdf OIL & GAS CONSERVATION DIVISION For

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,

Check Applicable Boxes: MUST be submit	ted with this form. 1			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: april 1 2002			
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 124177 Bradshaw Lease Name:			
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:				
Spot Location:				
660 feet from X E / W Line	Legal Description of Lease: 33-16-13 W			
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County:Barton			
Number of Injection Wells**	Production Zone(s): Arbuckle			
Field Name:				
** 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. 7292 Exp. 6/30/02				
Past Operator's License No. Nuss 011	Contact Person: Joetta Mai 785-483-4038			
Past Operator's Name & Address:	Phone:			
326 Hartman Str. Russell	1 k _{Sate:} /-/-13			
Owner Title:	Signature: Joetta Mai			
Old purchaser conoco				
New Operator's License No31341 ✓	Contact Person: Ward Craig			
04-041	Phone: 785-483-1543			
New Operator's Name & Address: Craig OII 15 south main Russell Ks. 67665	·			
DARRIVER	Oil / Gas Purchaser:			
KANSAS CORPORATION COMMISSION	Date: 7-7+15			
Title: Owner AUG 1 2 2015	Signature: Ward D Crace			
CONSERVATION DIVISION				
Acknowledgment of Transfer: The above request for transfer of injection				
	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: Authorized Signature			
0.111.11	0/17/1/01/7-10			
DISTRICT EPR 37475 Mail to: Past Operator New Opera	·			
Total Operation				

Side Two

Must Be Filed For All Wells

NDOU LEASE	No.: 124177 Bradswaw			w2-s2-se-ne 33-	16-1314
Lease Name:	DIAGONAW		* Location:	WZ 32 BE-HE 33-	
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1-33 1	5-009-24027	3300 Gircle	660 Circle	oil producer	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		and the second s
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEU/FWL		
		FSL/FNL	FEL/FWL		
	No. Control Control Control			41004	
		FSL/FNL	FEL/FWL		
			FEL/FWL	KANSAS CORPORATION	COMMISSION
		FSL/FNL	FEL/FWL	AUG 12	2015
		FSL/FNL	FEL/FWL	CONSERVATION (WICHITA, K	
		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 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 (Cat	thodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License # 31341 Name: Craig oil 15	Well Location: w2 -s2 - ne - ne Sec. 33 _ Twp. 16 _s. R. 13 _ □ East ★ West County: □ BARTON Lease Name: □ BRADSHAW Well #: 1-33 If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Surface Owner Information: Name: CLH Investment LLC Address 1: HOISINGTON KS 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. City: Hoisington State: Ks Zip: 67544 +				
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 Accowner(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, and	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form cling filed is a Form C-1 or Form CB-1, the plat(s) required by this			
I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KC	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			
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				
I hereby certify that the statements made herein are true and correct to the Date: 5-/0-2015 Signature of Operator or Agent:				