

**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 3 **

Gas Gathering System: _____

Saltwater Disposal Well - Permit No.: D28815

Spot Location: 1650 feet from N / S Line
2300 feet from E / W Line

Enhanced Recovery Project Permit No.: _____

Entire Project: Yes No

Number of Injection Wells _____ **

Field Name: Louisburg Paola - Rentoul

Effective Date of Transfer: 8/13/2015

KS Dept of Revenue Lease No.: 230070 & 230071

Lease Name: Eberling

 - - - Sec. 18 Twp. 16 R. 25 E W

Legal Description of Lease: NE/4 of SW/4 Sec18, Twp 16S, Range 25E

County: Miami

Production Zone(s): Cherokee coals & shales

Injection Zone(s): Arbuckle Disposal

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

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. 33677

Past Operator's Name & Address: Canary Operating
Address NA, company is out of business

Contact Person: _____ **Received**
 KANSAS CORPORATION COMMISSION

Phone: _____

Date: AUG 14 2015

Signature: _____
 CONSERVATION DIVISION
 WICHITA, KS

Title: Attachment On File (per legal)

New Operator's License No. 34971 /

New Operator's Name & Address: Eastern Kansas Operating, LLC
9532 E Riggs Road
Sun Lakes, AZ 85248

Title: Supervisor

Contact Person: Jeff Taylor

Phone: (913) 238-2261

Oil / Gas Purchaser: Constellation New Energy-Gas Division, LLC

Date: August 13, 2015

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.

Eastern Kansas Operating LLC is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: D-28,815. Recommended action: NONE

Date: 8-20-15 Cheryl R. Boyes
 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 8-19-15 PRODUCTION 8-20-15 UIC 8-20-15
 Mail to: Past Operator _____ New Operator 8-20-15 District (3) 8-20-15

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 # 34971
Name: Eastern Kansas Operating, LLC
Address 1: PO Box 13350
Address 2: _____
City: Chandler State: AZ Zip: 85248 + _____
Contact Person: Jeff Taylor
Phone: (913) 238-2261 Fax: (NA) _____
Email Address: jttaylor57@gmail.com

Well Location:
_____ Sec. 18 Twp. 16 S. R. 25 East West
County: Miami
Lease Name: Eberting Well #: _____

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

NE/4 of the SW/4, forty acres more or less Sec 18, Twp 16S, Rng 25E

Surface Owner Information:

Name: SKR Holdings, LLC
Address 1: PO Box 14000
Address 2: _____
City: Sun Lakes State: AZ Zip: 85248 + _____

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: 8/13/2015 Signature of Operator or Agent: [Signature] Title: Supervisor

Received
KANSAS CORPORATION COMMISSION

AUG 14 2015

CONSERVATION DIVISION
WICHITA, KS