

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 18 **
☐ 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.: E23543
Entire Project: ☒ Yes ☐ No
Number of Injection Wells 9 **
Field Name: BLOCK

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

Effective Date of Transfer: 05/01/2015
KS Dept of Revenue Lease No.: 100518
Lease Name: WINDLER
____ - NW - NW Sec. 21 Twp. 18 R. 24 ☒ E ☐ W
Legal Description of Lease: NW4 NW4, NE NW, NW NE
N/2
County: MIAMI
Production Zone(s): SQUIRREL
Injection Zone(s): SQUIRREL

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 OR ☐ Drilling

Past Operator's License No. 32428
Past Operator's Name & Address: KEITH CRAWFORD
30842 INDIANAPOLIS ROAD, PAOLA, KS 66071
Title: OWNER

Contact Person: KEITH CRAWFORD
Phone: 913-294-4165 OR 913-636-1082
Date: 9-16-15
Signature: [Signature]

New Operator's License No. 32834
New Operator's Name & Address: JTC OIL, INC.
35790 PLUM CREEK ROAD
OSAWATOMIE, KS 66064
Title: PRESIDENT

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Contact Person: TOM CAIN
Phone: 913-755-2959
Oil / Gas Purchaser: PACER ENERGY MARKETING
Date: 9-15-15
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.

JTC Oil Inc is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: E-23,543 Recommended action: NONE
Date: 9-24-15 Cheryl L Beyers
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 <u>9-23-15</u>	PRODUCTION <u>9-28-15</u>	UIC <u>9-24-15</u>
Mail to: Past Operator <u>9-24-15</u>	New Operator <u>9-24-15</u>	District <u>(3)</u>	<u>9-24-15</u>

Must Be Filed For All Wells

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KDOR Lease No.: 100518 ✓

* Lease Name: WINDLER

* Location: NW4 NW4, NE NW, NW NE, N/2

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)
23	15-121-26518-00-01 /	4125 ^{Circle} FSL/FNL -2772 ^{Circle} FEL/FWL	INJ	AUTHORIZED INJECTION WELL
32	15-121-26838-00-01 /	4429 ^{Circle} FSL/FNL -3720 ^{Circle} FEL/FWL	INJ	AUTHORIZED INJECTION WELL
24	15-121-26519-00-01 /	4726 ^{Circle} FSL/FNL -2772 ^{Circle} FEL/FWL	INJ	AUTHORIZED INJECTION WELL
18	15-121-22878-00-01 /	4422 ^{Circle} FSL/FNL -3128 ^{Circle} FEL/FWL	INJ	AUTHORIZED INJECTION WELL
26	15-121-26549-00-01 /	5011 ^{Circle} FSL/FNL -3430 ^{Circle} FEL/FWL	INJ	AUTHORIZED INJECTION WELL
22	15-121-26365-00-01 /	4429 ^{Circle} FSL/FNL -2772 ^{Circle} FEL/FWL	INJ	AUTHORIZED INJECTION WELL
20	15-121-26363-00-01 /	4726 ^{Circle} FSL/FNL -3425 ^{Circle} FEL/FWL	INJ	AUTHORIZED INJECTION WELL
27	15-121-26619-00-01 /	5029 ^{Circle} FSL/FNL -3731 ^{Circle} FEL/FWL	INJ	AUTHORIZED INJECTION WELL
28	15-121-26620-00-01 /	4726 ^{Circle} FSL/FNL -3727 ^{Circle} FEL/FWL	INJ	AUTHORIZED INJECTION WELL
13	15-121-20705 ✓	4478 ^{Circle} FSL/FNL -3795 ^{Circle} FEL/FWL	OIL	PRODUCING
14	15-121-21619 ✓	5157 ^{Circle} FSL/FNL -2766 ^{Circle} FEL/FWL	OIL	PRODUCING
15	15-121-22070 ✓	4125 ^{Circle} FSL/FNL -3795 ^{Circle} FEL/FWL	OIL	PRODUCING
19	15-121-22985 ✓	450 ^{Circle} FSL/FNL 375 ^{Circle} FEL/FWL	OIL	PRODUCING
16	15-121-22081 ✓	1075 ^{Circle} FSL/FNL 675 ^{Circle} FEL/FWL	OIL	PRODUCING
17	15-121-22560 ✓	1075 ^{Circle} FSL/FNL 1015 ^{Circle} FEL/FWL	OIL	PRODUCING
25	15-121-26548 ✓	5115 ^{Circle} FSL/FNL -3300 ^{Circle} FEL/FWL	OIL	PRODUCING
31	15-121-26837 ✓	4515 ^{Circle} FSL/FNL -3950 ^{Circle} FEL/FWL	OIL	PRODUCING
29	15-121-26840 ✓	5115 ^{Circle} FSL/FNL -3940 ^{Circle} FEL/FWL	OIL	PRODUCING
2	15-121-19273 ✓	4290 ^{Circle} FSL/FNL -2815 ^{Circle} FEL/FWL	OIL	PRODUCING
3	15-121-19274 ✓	4455 ^{Circle} FSL/FNL -2815 ^{Circle} FEL/FWL	OIL	PRODUCING
5	15-121-19276 ✓	4785 ^{Circle} FSL/FNL -3135 ^{Circle} FEL/FWL	OIL	PRODUCING
4	15-121-19275 ✓	5115 ^{Circle} FSL/FNL -3115 ^{Circle} FEL/FWL	OIL	PRODUCING
12	15-121-19277 ✓	5115 ^{Circle} FSL/FNL -3795 ^{Circle} FEL/FWL	OIL	PRODUCING
27	15-121-26619-00-01	4660 ^{Circle} FSL/FNL -3770 ^{Circle} FEL/FWL	INJ Duplicate	AUTH INJ WELL

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.

* Location: NW4 NW4, NE NW, NW NE, N/2

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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 # 32834
Name: JTC OIL, INC.
Address 1: 35790 PLUM CREEK ROAD
Address 2: _____
City: OSAWATOMIE State: KS Zip: 66064 + _____
Contact Person: TOM CAIN
Phone: (913) 755-2959 Fax: (_____) _____
Email Address: tcain@aceoilwellservice.com

Well Location:
_____ NW NW Sec. 21 Twp. 18 S. R. 24 ☒ East ☐ West
County: MIAMI
Lease Name: WINDLER Well #: ALL
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
NW4 NW4, NE NW, NW NE, N/2

Surface Owner Information:

Name: GREG WINDLER
Address 1: 15341 W 359TH ST
Address 2: _____
City: PAOLA State: KS Zip: 66071 + _____

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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.

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: 9-15-15 Signature of Operator or Agent: [Signature] Title: Owner