KANSAS CORPORATION COMMISSION

Form T-1 March 2010 OIL & GAS CONSERVATION DIVISION 061515_Hibbert_A.pdf Form must be Typed Form must be Signed REQUEST FOR CHANGE OF OPERATOR All blanks must be Filled

TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,

Check Applicable Boxes:	ttea with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:June 15, 2015
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.:
Gas Gathering System:	Lease Name: Hibbert A
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	Sec. 27 Twp. 14S R. 32 E V W
feet from E / W Line	Legal Description of Lease: E/2 NE/4
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Logan
Number of Injection Wells **	Production Zone(s): Kansas City
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 DR Drilling
Past Operator's License No34639 /	Contact Person: Chris Leiker
Past Operator's Name & Address: Black Tea Oil, LLC	Phone: 785-259-8701
1014 East 29th St., Hays, KS 67601	- 15-15
Title: President	KANSAS CORPORATION COMMISSION
Title:	Signature: SEP 1 1 2015
Now Operators License No. 9408	Alon D. Bonto CONGEDIATION DIVISION
New Operator's License No.	WICHITA, KS
New Operator's Name & Address: Trans Pacific Oil Corporation	Phone: 316-262-3596
100 S. Main, Suite 200, Wichita, KS 67202	Oil / Gas Purchaser: Coffeyville Resources
	Date:
Title: President	Signature:
	Signature.
Acknowledgment of Transfer: The above request for transfer of injection a	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 a	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:	·
Triboninionad adion.	permitted by No.:
Date:	Date:
Date:	Authorized Signature
DISTRICT EPR F	PRODUCTION SEP 2 2 2015 SEP 2 2 2015
Mail to: Past Operator New Operato	

Side Two

Must Be Filed For All Wells

Lease Name: Hibbert A Location: xE/2 NE/4, Sec. 27-14S-32W Well No. (YR DRLDPRE167) Footage from South Line) (Le. FSL. Feet from South Line) (Old Gas/INJ/WSW) Type of Well (Old Gas/INJ/WSW) Well Status (PROD/TAD/Abandoned) 2 15-109-21328 / 2325 FSUFNL 330 FED/FWL OIL PROD 3 15-109-21329 / 1760 FSUFNL 750 FEL/FWL OIL PROD FSUFNL FSUFNL FEL/FWL FEL/FWL FSUFNL FSUFNL FSUFNL FSUFNL FSUFNL FSUFNL FSUFNL FSUFNL FSUFNL FSUFNL FSUFNL SEP 1 2815 SEP 1 2815 SEP 1 2815 FSUFNL FSUFNL FSUFNL FSUFNL FSUFNL SEP 1 2815 SEP 1 2815 SEP 1 2815 FSUFNL FSUFNL	KDOR Lease	No.:	652			
(YFI DRILD/PRE '67) (i.o. FSL = Feet from South Line) (OliGas/INJWSW) (PROD/TAD/Abandoned) 2	* Lease Name:	Hibbert A		* Location: <u>#</u> E/	/2 NE/4, Sec. 27-14S-3	2W
2 15-109-21328 / 2325 FSUFNU 330 €EUFWL OIL PROD 3 15-109-21329 / 1760 FSUFNU FEUFWL FSUFNU F	Well No.					
FSUFNL FEUFWL	2	15-109-21328	2325 FSL/FNL	330 Circle	OIL	PROD
FSUFNL FELFWL	3	15-109-21329	1760 FSL/FNL	750 FELFWL	OIL	PROD
FSUFNL FEUFWL			FSL/FNL	FEL/FWL		-
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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:	athodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 9408	Well Location:		
Name: Trans Pacific Oil Corporation			
Address 1: 100 S. Main, Suite 200	County: Logan		
Address 2:	Lease Name: Hibbert A Well #: 2, 3		
City: Wichita State: KS Zip: 67202 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: Glenna Lowe	the lease below:		
040 000 0000 016 067 7104	NE		
Email Address: glowe@transpacificoil.com	SSION		
Surface Owner Information: Name: Corinne Krebs Trust Address 1: c/o Dianne Unruh	(S) ISION When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: <u>c/o Dianne Unruh</u>	sheet listing all of the information to the left for each surface owner. Surface		
Address 1: 1209 W. 9th St.	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: Scott City State: KS Zip: 67871 +	,		
City State Zip			
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: I certify that, pursuant to the Kansas Surface Owner Notice Acover (s) of the land upon which the subject well is or will be lo	cated: 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 b form; and 3) my operator name, address, phone number, fax, ar	eing filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.		
I have not provided this information to the surface owner(s). I ac KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling	sknowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handling to form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	fee 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	the best of my knowledge and belief.		
Date: 9/1/15 Signature of Operator or Agent:	Title: Production Assistant		