

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form T-1
11-14

081215_England_INJ.pdf

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 5 **
- ☐ 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.: E-32005
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells 1 **

Effective Date of Transfer: 8/12/2015

KS Dept of Revenue Lease No.: 115583 ✓

Lease Name: England

_____ - W2 - NW4 Sec. 32 Twp. 18 R. 21 ☒ E ☐ W

Legal Description of Lease: W/2 NW/4 Sec 32 ✓

T18-S, R21-E

County: Franklin ✓

Production Zone(s): Squirrel ✓

Injection Zone(s): Squirrel ✓

Field Name: Paola-Rantoul

**** 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 OR ☐ Drilling

Past Operator's License No. 33741 ✓

Past Operator's Name & Address: EnerJex Kansas, Inc.
PO Box 45, Rantoul, KS 66079

Title: CEO

Contact Person: Robert Watson **KCC WICHITA**

Phone: 210-451-5545

Date: 8/19/2015 **SEP 04 2015**

Signature: [Signature] **RECEIVED**

New Operator's License No. 33640 ✓

New Operator's Name & Address: Haas Petroleum, LLC
1151 Ash St., #205
Leawood, KS 66211

Title: Owner

Contact Person: Mark Haas **KCC WICHITA**

Phone: 913-499-8373 **AUG 24 2015**

Oil / Gas Purchaser: Coffeyville Resources, LLC **RECEIVED**

Date: 8/21/2015

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.

Haas Petroleum LLC is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: E-32.005 Recommended action: NONE

Date: 9-9-15 Cheryl L Beyer
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>9-8-15</u>	PRODUCTION <u>9-14-15</u>	UIC <u>9-9-15</u>
Mail to: Past Operator <u>9-9-15</u>	New Operator <u>9-9-15</u>	District <u>(3)</u>	<u>9-9-15</u>

115583'

KCC WICHITA
AUG 24 2015
RECEIVED

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 # 33640

Name: Haas Petroleum, LLC

Address 1: 1151 Ash Street

Address 2: #205

City: Leawood State: KS Zip: 66211 +

Contact Person: Julie Barber

Phone: (913) 499-8373 Fax: (913) 766-1310

Email Address: julie@haaspetroleum.com

KCC WICHITA

SEP 04 2015

RECEIVED

Well Location:

- W2 NW4 Sec. 32 Twp. 18 S. R. 21 ☒ East ☐ West

County: Franklin

Lease Name: England Well #: 1

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

W/2 NW/4 Sec 32, T18-S,R21-E, Franklin
County, KS

KCC WICHITA

AUG 24 2015

RECEIVED

Surface Owner Information:

Name: Jimmy W. & Sharon D. Martin Trust

Address 1: 1253 75 St

Address 2:

City: Eureka State: KS Zip: 67045 +

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.

8/17/2015

Date: Signature of Operator or Agent: Title: operator