## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 070115\_Schlichting.pdf Form must be Typed

July 2014 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 submitted			
Oil Lease: No. of Oil Wells **	Effective Date of Transfer:		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 141805		
Gas Gathering System:	Lease Name: Schlichting		
Saltwater Disposal Well - Permit No.:	SESWNE_Sec8 Twp32S_R1VEW		
Spot Location: 2310 feet from N / S Line	Legal Description of Lease: NE/4 Sec. 8-32S-1E		
1650 feet from 🗸 E / 🗌 W Line	Legal Description of Lease.		
Enhanced Recovery Project Permit No.:	Sumper		
Entire Project: Yes No	County: Sumner		
Number of Injection Wells **	Production Zone(s): Simpson		
Field Name: Rusk	Injection Zone(s):		
** Side Two Must Be Completed.			
Surface Pit Permit No.: 15-191-22597	2310 feet from V N / S Line of Section		
(API No. if Drill Pit, WO or Haul)	1650 feet from VE / W Line of Section		
C/S 7-/4-// Type of Pit: Emergency Burn Settling	Haul-Off Workover OF V Drilling		
Type of the Cartesian Cart			
Past Operator's License No. 34633	Contact Person: Bill Kent		
Past Operator's Name & Address: Source Energy MidCon LLC	Phone:		
1805 Shea Center Drive, Suite 100, Highlands Ranch, CO 80129	Date: October 20, 2015		
Title: VP Engineering	Signature: Received		
	KANSAS CORPORATION COMMISSION		
New Operator's License No.	Contact Person: Alex T. Warmath OCT 2 2 2015		
New Operator's Name & Address: K3 Oil LLC	Phone: 832-234-0810 CONSERVATION DIVISION		
New Operator's Name & Adoress:  211 Highland Cross, Suite 250, Houston, TX 77073	Oil / Gas Purchaser: Coffeyville		
	Date: October 20, 2015		
050			
Title: CEO	Signature: Owx 1. Walkary		
	outhorization surface pit permit # 15-191-22597 has been		
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit #		
	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) of pit permit.		
is a stratistadas of an	is acknowledged as		
is acknowledged as	the new operator of the above named lease containing the surface pit		
the new operator and may continue to inject fluids as authorized by	permitted by No.:		
Permit No.: Recommended action:			
	Date		
Date:	Date: Authorized Signature		
11-4-15	PRODUCTION		
DISTRICT EPR // / / / / / / / / / / / / / / / / /	P. M.		

Side Two

#### Must Be Filed For All Wells

KDOR Lease	No.: 141805	· · · · · · · · · · · · · · · · · · ·				
Lease Name: Schlichting			* Location: Sumner County, KS			
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)	
7-8-4	15-191-22597/	Circle 2310 FNL FSL/FNL	Circle 1650 FEL FEL/FWL	Oil	Active	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		_	
			FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		_	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		Received	
		FSL/FNL	FEL/FWL		RECEIVED REPORTED COMMISSION	
	· 	FSL/FNL	FEL/FWL		T 2 2 2015  ERVATION DIVISION	
		FSL/FNL	FEL/FWL		WICHITA, KS	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		_	
		FSL/FNL	FEL/FWL			

A separate sheet may be attached if necessary

<sup>\*</sup> 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.

OPERATOR: License # 34633	Well Location:
Name: Source Energy MidCon LLC	SESWNE_Sec8
Address 1: 1805 Shea Center Dr. STE 100	County: Sumner
Address 2:	Lease Name: Schlichting Well #: 7-8-4
City: Highlands Ranch State: CO Zip: 80129 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: Bill Kent	the lease below:
Contact Person: Bill Kent  Phone: ( 720 ) 763-3670 Fax: ( 720 ) 387-8621	<del></del>
Email Address: bkent@sourceep.com	Moreon De
Record	N COMMISSION
<b>△</b> ¶ 1	2015
Surface Owner Information:  Schlichting Evernat Trust	on DIVISION
Name: Schlichting Exempt Trust  Address 1: C/o Stewart Management Company  CONSERVATION  CONSERVATIO	TA, KS 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
Address 2: P. O. Box 2	county, and in the real estate property tax records of the county treasurer.
City: Wellington State: KS Zip: 67152 +	_
	tank batteries, pipelines, and electrical lines. The locations shown on the plat ed on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the subject well is or will a	ce Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form orm being filed is a Form C-1 or Form CB-1, the plat(s) required by this ex, and email address.
KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the e owner(s). To mitigate the additional cost of the KCC performing this ress of the surface owner by filling out the top section of this form and he KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 hand form and the associated Form C-1, Form CB-1, Form T-1, or Form	lling fee with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned.
I hereby certify that the statements made herein are true and correg	at to the best of my knowledge and belief.
, ,	,
October 20, 2015	VP Engineering