

**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 4 **

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 - 32,131

Entire Project: Yes No

Number of Injection Wells 4 (1 approved) 1 **

Field Name: Paola - Rantoul ✓

Effective Date of Transfer: October 1, 2015

KS Dept of Revenue Lease No.: 115853

Lease Name: Phillips ✓

_____ - _____ - NW Sec. 21 Twp. 16S R. 24 E W

Legal Description of Lease: The Northwest Quarter of 21-16S-24E

County: Miami ✓

Production Zone(s): Squirrel

Injection Zone(s): Squirrel ✓

**** 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. 34350 ✓

Past Operator's Name & Address: Altavista Energy, Inc.
PO Box 128, Wellsville, KS 66092

Title: President

Contact Person: Douglas G. Evans

Phone: 785-883-4057

Date: October 23, 2015

Signature: [Signature]

Received
KANSAS CORPORATION COMMISSION
NOV 02 2015
CONSERVATION DIVISION
WICHITA, KS

New Operator's License No. 6143 ✓

New Operator's Name & Address: Somerset Energy, Inc.
PO Box 716
Louisburg, KS 66053

Title: President

Contact Person: Lance Town

Phone: 913-491-1717

Oil / Gas Purchaser: Coffeyville Resources

Date: October 23, 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.

Somerset Energy Inc is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: E-32,131. Recommended action: Need Applications/Amendment on 3 wells only

Date: 11-23-15 Cheryl L. Boyer
 Authorized Signature

_____ is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.: _____

Date: _____ Authorized on this permit
 Authorized Signature

DISTRICT _____	EPR <u>11-20-15</u>	PRODUCTION <u>11-30-15</u>	UIC <u>11-23-15</u>
Mail to: Past Operator <u>11-23-15</u>	New Operator <u>11-23-15</u>	District <u>3</u>	<u>11-23-15</u>

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 # 34350
Name: Altavista Energy, Inc.
Address 1: PO Box 128
Address 2: _____
City: Wellsville State: KS Zip: 66092 + _____
Contact Person: Phil Frick
Phone: (785) 883-4057 Fax: (_____) _____
Email Address: _____

Well Location: _____ NW Sec. 21 Twp. 16 S. R. 24 East West
County: Miami
Lease Name: Phillips Well #: (All)

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

The Northwest Quarter of 21-16S-24E

Received
KANSAS CORPORATION COMMISSION

NOV 02 2015

CONSERVATION DIVISION
WICHITA, KS

Surface Owner Information:

Name: Gary and Cindy Hauer
Address 1: PO Box 104
Address 2: _____
City: Louisburg State: KS Zip: 66053 + _____

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.

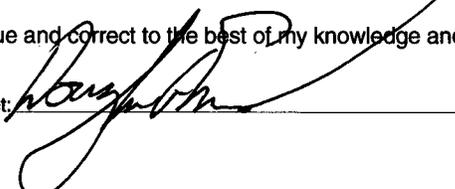
Select one of the following:

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: 10/23/2015 Signature of Operator or Agent:  Title: President