### Kansas Corporation Commission Oil & Gas Conservation Division

090115\_Schlegel.pdf

odf July 2014
Form must be Typed
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: MUST be submit	ited with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 9-1-2015		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 140905  Lease Name: Schlegel  W2 - NE - NW - NW Sec. 33 Twp. 15 R. 17 EVW		
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:			
Spot Location: 330 feet from 📝 N / 🗌 S Line			
feet from ☐ E / 🗸 W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	sa. 33-15-17 W		
Entire Project: Yes No	County: Ellis  Production Zone(s): Arbuckle  Injection Zone(s):		
Number of Injection Wells **			
Field Name:			
** Side Two Must Be Completed.	injection zorie(s).		
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover OR Drilling Received		
Past Operator's License No33922√	Contact Person: Rodney Brin DEC 0 9 2015		
Past Operator's Name & Address: Mustang Energy Corporation	785-623-0533		
PO Box 1121, Hays, KS 67601	Date: CONSERVATION DIVISION WICHITA, KS		
VI V	No Villation		
Title: President	Signature:		
New Operator's License No. 33864	Contact Person: Irvin E. Haselhorst RECEIVED		
New Operator's Name & Address: Habit Petroleum LLC	Phone: 785-623-1154		
PO BOX 243, Hays, KS 67601	Oil / Gas Purchaser: Correyville Resources		
	Date: 10-19-2015		
Title: Owner	Signature: Drain C. Parel Jani		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #has been		
	n 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.		
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:	permitted by No.:		
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR _/2-/5-/5	PRODUCTION 12.16.15 UIC 12-16-15		
Mail to: Past Operator New Opera	ator District		

#### Side Two

#### Must Be Filed For All Wells

Lease Nar	me: Schlegel		* Location:	11E-14W-1100	sa.33-15-17 h
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)
1	<u>/5</u> _051-25,978-00-00√	330 Circle	790 Circle	Oil	Prod.
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	·	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	Receive KANSAS CORPORATION	ed V COMMISSION
		FSL/FNL	FEL/FWL	DEC 09	2015
		FSL/FNL	FEL/FWL	CONSERVATION WICHITA,	DIVISION KS
		FSL/FNL	FEL/FWL		WICHITA
		FSL/FNL	FEL/FWL	KCC	3 0 2015
		FSL/FNL	FEL/FWL	001	ECEIVED
		FSL/FNL	FEL/FWL	R	EOLIVE TO THE PROPERTY OF THE
		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 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: C-1 (Intent) CB-1 (Car	thodic Protection Borehole Intent) 🗵 T-1 (Transfer) 🗆 CP-1 (Plugging Application)			
OPERATOR: License # 33922	Well Location:			
Name: Mustang Energy Corporation	WL.NE.NW. NW Sec. 33 Twp. 15 S. R. 17 East X West			
Address 1: PO Box 1121	County: Ellis			
Address 2:	Lease Name: Schlegel Well #: 1			
City: Hays State: KS Zip: 67601 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of			
Contact Person: Rod Brin	the lease below:			
Phone: ( 785 ) 623-0533 Fax: ( )				
Email Address:  Received Received KANSAS CORPORATION COMMISSION				
Receive COMPONE				
Surface Owner Information:				
Name: Myron Schlegel  Address 1: 3507 Fairway Dr  CONSERVATION DIVISION CONSERVATION DIVISION	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			
Address 2:	county, and in the real estate property tax records of the county treasurer.			
City: Hays State: KS Zip: 67601 +				
the KCC with a plat showing the predicted locations of lease roads, tank be are preliminary non-binding estimates. The locations may be entered on t				
Select one of the following:				
I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be loce CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and	ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this			
I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface owner task, I acknowledge that I am being charged a \$30.00 handling fe	er(s). To mitigate the additional cost of the KCC performing this			
If choosing the second option, submit payment of the \$30.00 handling fe form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1				
I hereby certify that the statements made herein are true and correct to the	ne best of my knowledge and belief.			
Date: 12-7-15 Signature of Operator or Agent:	Bt. Title: President			