## Kansas Corporation Commission 100115\_Dena\_B2\_INJ.pdf OIL & GAS CONSERVATION DIVISION

Form T-1 July 2014

REQUEST FOR CHANGE OF OPERATOR WICHITA, KS

Form must be Typed Form must be Signed 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: MUST be subm	itted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 10/01/2015
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.:
Gas Gathering System:	Lease Name: Dena B2
Saltwater Disposal Well - Permit No.: D30756.0	
Spot Location: 990 feet from ✓ N / S Line	NE SE SW Sec31 _Twp33S _ R8 E 🗸 W
3070 feet from ☐ E / ✓ W Line	Legal Description of Lease: NE SE SW Sec 31-33S-8W /
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Harper 🗸
Number of Injection Wells **	Production Zone(s): KCC WICH
Field Name: Hibbord NE	Si sea Astable Mou
** Side Two Must Be Completed.	Injection Zone(s): SimpsM + Arbuckle NOV 06 201
Surface Pit Permit No.:	RECEIVE
(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section
Type of Pit: Emergency Burn Settling	feet fromE /W Line of Section  Haul-Off Workover Drilling
o , , , , , , , , , , , , , , , , , , ,	Haul-Off Workover Drilling
Past Operator's License No. 33936 /	Contact Person: Charles N Griffin
Past Operator's Name & Address: Griffin Management LLC	Phone: 972-342-4648
PO Box 347 Pratt KS 67124	Date: 11/4/15
Title: President	1/1/1/1-
Title:	Signature: 300 SH
New Operator's License No. 35247 /	Contact Person: L. Roger Hutson
New Operator's Name & Address: HRM Resources II LLC	Phone: 303-893-6621
410 - 17th St Ste #1100	Oil / Gas Purchaser:
Denver CO 80202	
Title: President	Date:
Title:	Signature:
	C y Vu
Acknowledgment of Transfer: The above request for transfer of injection	
	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.
HRM Resources [], LLC 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.: D-30, 756 . Recommended action: No NE	permitted by No.:
MIT WILL be Due 12915	pormitto by 140
Date: 12-215 Chewl & Bays	Date:
Authorized Signature	Authorized Signature
DISTRICT	PRODUCTION DEC 0 4 2015 UIC 12-2-15
Mail to: Past Operator 12-2-15 New Operator	100

#### Side Two

#### Must Be Filed For All Wells

RANSAS CORPORATION COMMISSION

NOV 0 6 2015

KDOR Lease	e No.:	þ			CONSERVATION DIVISION WICHITA, KS
* Lease Name: _ Dena B2		* Location: NE SE SW Sec 31-33S-8W			
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet from		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
B2	15-077-21706-00-00	. 990 Circle FSL FNL	3070 Circle	INJ	SWD
		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	-	
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		

A separate sheet may be attached if necessary

\_\_\_\_\_FEL/FWL

\_FSL/FNL

<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.

# Received KANSAS CORPORATION COMMISSION

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

NOV 06 2015

Form KSONA-1 July 2014

All blanks must be Filled

# CERTIFICATION OF COMPLIANCE WITH THECHITA, KS CONSERVATION DIVISION Form Must Be Typed Form must be Signed All blanks must be Filled 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 # 33936	Molt Location			
Name: Charles N Griffin	_ Well Location:  NE SF SW coa 31 Turn	33 S. R. 8 East X West		
Address 1: PO Box 347	County: Harper	S. H. East X West		
Address 2:	Lease Name. Dena	Well # B2		
City: Pratt State: KS Zip: 67124 +	If filing a Form T-1 for multiple wells on			
Contact Person: Charles N Griffin	the lease below:	a lease, enter the legal description o		
Contact Person: Charles N Griffin  Phone: ( 972 ) 342-4648 Fax: ( 620 ) 672-5280				
Email Address:	-			
Surface Owner Information:				
Name: Diel Farms LLC	When filing a Form T-1 involving multiple	e surface owners, attach an additiona		
Address 1: c/o Brent Diel	sheet listing all of the information to the left for each surface owner. Surfaceowner information can be found in the records of the register of deeds for			
Address 2: 212 Coats  City: Kiowa State: KS Zip: 67070 +	county, and in the real estate property to	ax records of the county treasurer.		
City: Kiowa State: KS Zip: 67070 +	_			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cath the KCC with a plat showing the predicted locations of lease made to	nodic Protection Borehole Intent), you must	st supply the surface owners and		
are preliminary non-binding estimates. The locations may be entered	ink batteries, pipelines, and electrical lines	The locations shown on the plat		
are preliminary non-binding estimates. The locations may be entered	Act (House Bill 2032), I have provided the located: 1) a copy of the Form C-1, Form C-	the locations shown on the plate a separate plat may be submitted.  The following to the surface of CR-1. Form T-1, or Form		
<ul> <li>I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form</li> </ul>	Act (House Bill 2032), I have provided the located: 1) a copy of the Form C-1, Form being filed is a Form C-1 or Form CB-1, and email address.  acknowledge that, because I have not proportional cost of the surface owner by filling out the form care of the surface owner by filling out the form care on the surface owner by filling out the form care on the surface owner by filling out the form care on the surface owner by filling out the form care on the surface owner by filling out the form care on the surface owner by filling out the form care on the surface owner by filling out the form care on the surface owner by filling out the form care on the surface owner by filling out the surface owner by filling out the form care of the surface of the surface owner by filling out the surface owne	the locations shown on the plate a separate plat may be submitted.  The following to the surface in CB-1, Form T-1, or Form the plat(s) required by this povided this information, the post the KCC performing this pays section of this form and		
Owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax,  I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I must provide the name and address	Act (House Bill 2032), I have provided the located: 1) a copy of the Form C-1, Form being filed is a Form C-1 or Form CB-1, and email address.  acknowledge that, because I have not proportional cost of the surface owner by filling out the toe KCC, which is enclosed with this form.	the following to the surface in CB-1, Form T-1, or Form the plat(s) required by this covided this information, the posterior of the KCC performing this pop section of this form and		
If choosing the second option, submit payment of the \$30.00 handling.	Act (House Bill 2032), I have provided the located: 1) a copy of the Form C-1, Form being filed is a Form C-1 or Form CB-1, and email address.  acknowledge that, because I have not proportional cost of the surface owner by filling out the toe KCC, which is enclosed with this form.  If the fee is not received the returned.	the locations shown on the plate a separate plat may be submitted.  The following to the surface in CB-1, Form T-1, or Form the plat(s) required by this information, the position of this form and		