

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

120115_Stich.pdf

Form T-1
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:

- ☒ Oil Lease: No. of Oil Wells 8 **
☐ 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.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: Hale - Inge

**** Side Two Must Be Completed.**

Effective Date of Transfer: December 1, 2015

KS Dept of Revenue Lease No.: 113216

Lease Name: Stich

Sec. 15/22 Twp. 32S R. 12 ☒ E ☐ W

Legal Description of Lease: ** Section 15 - T32S - R12E

* ** N/2 Section 22 - T32S - R12E

County: Chautauqua

Production Zone(s): Weiser Sandstone

Injection Zone(s): Weiser Sandstone

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KCC-DIST #3

DEC 14 2015

CHANUTE, KS

Surface Pit Permit No.: P08315

(API No. if Drill Pit, WO or Haul)

Added - T. Oast 1-7-16
Type of Pit: ☐ Emergency ☐ Burn ☐ Settling

4620 feet from ☐ N / ☒ S Line of Section

3960 feet from ☒ E / ☐ W Line of Section

☐ Haul-Off ☐ Workover ☐ Drilling

Past Operator's License No. 7696 ✓

Past Operator's Name & Address: Stich Oil Company, a General Partnership

7250 130th Road Chanute, Kansas 66720

Title: Partner

Contact Person: Phillip Stich

Phone: (620) 763-2459

Date: December 1, 2015

Signature: Phillip Stich

New Operator's License No. 35261 /

New Operator's Name & Address: Thomas H. Oast

524 North School Street

Sedan, Kansas 67361

Title: Owner

Contact Person: Thomas H. Oast

Phone: (918) 440 - 6512

Oil / Gas Purchaser: Coffeyville Resources

Date: December 1, 2015

Signature: Thomas H. Oast

KCC WICHITA

DEC 16 2015

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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.

_____ is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: _____. Recommended action: _____

Date: _____

Authorized Signature

Thomas H Oast is acknowledged as
the new operator of the above named lease containing the surface pit
permitted by No.: P08315

Date: 1-8-15 Olivia Raigosa

Authorized Signature

CC. Kathy

DISTRICT _____ EPR 1-8-15 PRODUCTION _____ UIC 1-11-16
Mail to: Past Operator 1-12-16 New Operator 1-12-16 District #3 1-12-16

* Lease Name: Stich * Location: * Section 15, **N/2 Section 22 all being T32S - R12E

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A separate sheet may be attached if necessary

*Legal description added to KSONA-1 T East will mail corrected form to

*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.

Surface Owner - Frank Stich.

Surface Owner - Frank Stich.

KANSAS CORPORATION COMMISSION
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Form KSONA-1

July 2014

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**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 # 35261
Name: Thomas H. Oast
Address 1: 524 North School
Address 2: _____
City: Sedan State: KS Zip: 67361 + _____
Contact Person: Thomas H. Oast
Phone: (918) 440-6512 Fax: (620) 725-3211
Email Address: thomasoast@gmail.com

Well Location:

_____ Sec. 15/22 Twp. 32 S. R. 12 ☒ East ☐ West

County: Chautauqua

Lease Name: Stich Well #: Multiple

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

**Section 15
N/2 Section 22

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KCC DIST # 3

DEC 14 2015

CHANUTE, KS

Surface Owner Information:

Name: Frank Stich
Address 1: 7250 130th Road
Address 2: _____
City: Chanute State: KS Zip: 66720 + _____

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.

December 1, 2015
Date: _____ Signature of Operator or Agent: Thomas H. Oast Owner/Operator
Title: _____