010116_Washbon_Unit.pdf Form T-1
Form must be Typed

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**	Effective Date of Transfer:		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 206773		
Gas Gathering System:	Lease Name: WASHBON UNIT		
Saltwater Disposal Well - Permit No.:	C E2 _ NE _Sec 19 _Twp 31 _ R 8 E \sqrt{W} Legal Description of Lease:		
Spot Location: feet from N / S Line			
feet from E / W Line	SEC. 19-31S-8W		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: HARPER		
Number of Injection Wells **	Production Zone(s): MISSISSIPPI CHAT		
Field Name: Spivey Grabs	Injection Zone(s):		
** Side Two Must Be Completed.			
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pit, WO or Haul)	fact from F / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover De Drilling		
,,,poor, at [] and gone,	We Conten		
Past Operator's License No. 33999 /	Contact Person: SHAWN HILDRETH SHAWN HILDRETH SHAWN HILDRETH SHAWN HILDRETH		
Past Operator's Name & Address:LINN OPERATING, INC.	Phone: 281-840-4234 Date: 12/31/2015		
600 TRAVIS STE. 5100, HOUSTON, TEXAS 77002	Date: 12/31/2015 WICHTON 7/10		
Title: REGULATORY COMPLIANCE ADVISOR	Signature: Manth That arets "A. KS VISION		
New Operator's License No	Contact Person: YOUSUF CHAUDHARY		
New Operator's Name & Address: ATLAS OPERATING LLC	Phone: 281-893-9400		
15603 KUYKENDAHL RD. STE. 200, HOUSTON, TEXAS 77090	Oil / Gas Purchase		
	Date: 12/31/25/15		
VIOE PRECIPENT			
Title: VICE PRESIDENT	Signature: [
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.		
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:		
Date:	Date:		
	PRODUCTION 2.3.16 UIFEB - 3 2016		
	tor District		

Side Two

Must Be Filed For All Wells

Lease Name:	No.: 206773 WASHBON UNIT		* Location:	HARPER COUNTY SI	EC. 19-31S-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)
2	<u>1507720371</u> √	3960 M Circle	660 W Circle	GAS	PROD
		FSL/FNL	FEL/F W L	·	
		FSL/FNL	FEL/F WL		
		FSL/FNL	FEL/F WL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/F WL		ANSAS CORPORATION COMMING
		FSL/FNL	FEL/F W L		JAN JON COMMITTON
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		CHITA, KS DIVISION
			FEL/FWL		
			FEL/FWL		
			FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

^{*} 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

Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) 🗵 T-1 (Transfer) 🗆 CP-1 (Plugging Application)
ODEDATOR: License # 33999	Well Location:
Name: LINN OPERATING, INC.	CE2 - NE Sec. 19 Twp. 31 S. R. 8 East West
OPERATOR: License # 33999 Name: LINN OPERATING, INC. Address 1: 600 TRAVIS STE. 5100	County: HARPER
Address 2:	Lease Name: WASHBON UNIT Well #: 2
City: HOUSTON State: TX Zip: 77002 +	
Contact Person: SHAWN HILDRETH	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Phone: (281) 840-4234 Fax: ()	KANGA
Phone: (281) 840-4234 Fax: ()	CORPORALIVES
Linai Address.	the lease below: **ANSAS CORRECEIVED JAN 1 CONSERV. 4 2010
	When filing a Form T-1 involving multiple surface owners, attach around the surface owners, attach around the surface owners, attach around the surface owners.
Surface Owner Information: RILLY LEO SANDERS	WICHITANDINIO
Name: BILLY LEO SANDERS	When filing a Form T-1 involving multiple surface owners, attach at our sheet listing all of the information to the left for each surface owner. Surface
Address 1: 316 W 19TH	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: TIARPER State: KS Zip: 07036 +	
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered of Select one of the following: X certify that, pursuant to the Kansas Surface Owner Notice A	
	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.
KCC will be required to send this information to the surface ov	cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.
12/31/2015 May	Hidren REGULATORY COMPLIANCE ADVISOR
Date: Signature of Operator or Agent:	Title:

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 010116_Washbon.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,

Check Applicable Boxes:	1
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 01/01/2016
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 136521 & 226773
Gas Gathering System:	Lease Name: WASHBON
Saltwater Disposal Well - Permit No.:	NW _ NE _ NE Sec. 19 Twp, 31S R. 8 E V W
Spot Location: feet from N / S Line	NE Sec. 19 Wp. 310 H. 0 EV
feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	SEC. 19-31S-8W
Entire Project: Yes No	SEC. 19-31S-8W County: HARPER Production Zone(s): MISSISSIPPI CHAT Production Zone(s): MISSISSIPPI CHAT
Number of Injection Wells**	Production Zone(s): MISSISSIPPI CHAT CONSERVAT: 2016
Field Name: Spivey Grabs	ONSERVATION 2016
** Side Two Must Be Completed.	Production Zone(s): MISSISSIPPI CHAT CONSERVATION DIVISION WICHITA, KS
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover OR Drilling
Past Operator's License No33999 ✓	Contact Person: SHAWN HILDRETH
Past Operator's Name & Address: LINN OPERATING, INC.	Phone: 281-840-4234
600 TRAVIS STE. 5100, HOUSTON, TEXAS 77002	Date:
Title: REGULATORY COMPLIANCE ADVISOR	Mariante
itle: 1.200EATORY COMILEIANCE ADVISOR	Signature:
New Operator's License No. 34357	Contact Person: YOUSUF CHAUDHARY
New Operator's Name & Address: ATLAS OPERATING LLC	Phone: 281-893-9400
15603 KUYKENDAHL RD. STE. 200, HOUSTON, TEXAS 77090	Oil / Gas Purchaser: PIONEER EXPLORATION, LLC
	Date: 12/31/2015
VICE PRECIDENT	Date:
Title: VICE PRESIDENT	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.
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.:
remit No.: Recommended action.	permitted by No
Date:	Date:
Authorized Signature	Authorized Signature PRODUCTION 2.3.16 UIFEB - 3 2016

Must Be Filed For All Wells

136521 & 226773 KDOR Lease No.: HARPER COUNTY -- SEC. 19-31S-8W **WASHBON** * Lease Name: * Location: Type of Well Well No. API No. Footage from Section Line Well Status (YR DRLD/PRE '67) (Oil/Gas/INJ/WSW) (PROD/TA'D/Abandoned) (i.e. FSL = Feet from South Line) Circle Circle 1507721488 990 W FEDFWL **PROD** 3-19 330 **£** Oil & Gas FSL/FN/ FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL KAMSAS CORPORATION COMMISSION FSL/FNL FEL/FWL FSL/FNL FEL/FWL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FEL/FWL FSL/FNL FSL/FNL FEL/FWL FSL/FNL FEL/FWL

A separate sheet may be attached if necessary

FSL/FNL

FEL/FWL

^{*} 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.

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

OPERATOR: License # 33999	
Name: LINN OPERATING, INC.	Well Location:
	NW_NE_NE_Sec. 19 Twp. 31 S. R. 8 ☐ East West
Address 1: 600 TRAVIS STE. 5100	
Address 2:	Lease Name: WASHBON Well #: 3-19
City: HOUSTON State: TX Zip: 77002 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: SHAWN HILDRETH	the lease below: KANSAS COORS
Phone: (281) 840-4234 Fax: ()	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: KANSAS CORRECTOREO TANK CONTROL CONTROL CONTROL TANK CONTROL
Email Address: shildreth@linnenergy.com	- JAN 14 TOMM
	CONSERVATION CO.
Surface Owner Information:	CONSERVATION DIVISION
Name: BILLY LEO SANDERS	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: 316 W 19TH	sheet listing all of the information to the left for each surface owner. Surface
Address 2:	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.
city: HARPER State: KS Zip: 67058 +	
f 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
he KCC with a plat showing the predicted locations of lease road	Cathodic Protection Borehole Intent), you must supply the surface owners and its, tank batteries, pipelines, and electrical lines. The locations shown on the plat ered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
the KCC with a plat showing the predicted locations of lease road	ls, tank batteries, pipelines, and electrical lines. The locations shown on the plat
the KCC with a plat showing the predicted locations of lease road are preliminary non-binding estimates. The locations may be enterested one of the following: I certify that, pursuant to the Kansas Surface Owner No owner(s) of the land upon which the subject well is or with	ered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Detrice Act (House Bill 2032), I have provided the following to the surface ill be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
the KCC with a plat showing the predicted locations of lease road are preliminary non-binding estimates. The locations may be enterested one of the following: I certify that, pursuant to the Kansas Surface Owner Note owner(s) of the land upon which the subject well is or with CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, I have not provided this information to the surface owner (KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and actions.	ered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Detroited Act (House Bill 2032), I have provided the following to the surface ill be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
the KCC with a plat showing the predicted locations of lease road are preliminary non-binding estimates. The locations may be enterested one of the following: I certify that, pursuant to the Kansas Surface Owner Note owner(s) of the land upon which the subject well is or with CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, I have not provided this information to the surface owner (KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and act that I am being charged a \$30.00 handling fee, payable to the choosing the second option, submit payment of the \$30.00 handling the second option is submit payment of the \$30.0	dis, tank batteries, pipelines, and electrical lines. The locations shown on the platered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Detice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this fax, and email address. Solutions: I acknowledge that, because I have not provided this information, the face owner(s). To mitigate the additional cost of the KCC performing this address of the surface owner by filling out the top section of this form and to the KCC, which is enclosed with this form.
the KCC with a plat showing the predicted locations of lease road are preliminary non-binding estimates. The locations may be enterested one of the following: I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or with CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, I have not provided this information to the surface owner (KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and act that I am being charged a \$30.00 handling fee, payable to the choosing the second option, submit payment of the \$30.00 handling the second option, submit payment of the \$30.00 handling the associated Form C-1, Form CB-1, Form T-1, or Form thereby certify that the statements made herein are true and continuous continuous the statements made herein are true and continuous certifications.	dis, tank batteries, pipelines, and electrical lines. The locations shown on the platered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Detice Act (House Bill 2032), I have provided the following to the surface fill be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this fax, and email address. Solutions: I acknowledge that, because I have not provided this information, the face owner(s). To mitigate the additional cost of the KCC performing this eldress of the surface owner by filling out the top section of this form and to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 and CP-1 will be returned.
the KCC with a plat showing the predicted locations of lease road are preliminary non-binding estimates. The locations may be enterested one of the following: I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or with CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, I have not provided this information to the surface owner (KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and act that I am being charged a \$30.00 handling fee, payable to the choosing the second option, submit payment of the \$30.00 handling the second option, submit payment of the \$30.00 handling the associated Form C-1, Form CB-1, Form T-1, or Form the certify that the statements made herein are true and continuous true and	dis, tank batteries, pipelines, and electrical lines. The locations shown on the platered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Detice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this fax, and email address. The interpolation of the complete

Kansas Corporation Commission Oil & Gas Conservation Division

July 2014 010116_Banta_E.pdf Form must be Typed Form must be Signed All blanks must be Filled

Form T-1

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:	nittea with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 01/01/2016		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 106433		
Gas Gathering System:	Lease Name: BANTA 'E'		
Saltwater Disposal Well - Permit No.:	<u>SW_Sec. 34_Twp. 30S_R. 8</u> E W		
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	Legal Description of Lease: SW/4 County: KINGMAN KANSAS CORPORATION COMMISSI		
Entire Project: Yes No	County: KINGMAN JAN 1 A COMMISS.		
Number of Injection Wells**	Production Zone(s): MISSISSIPPI CHAT CONSERVATION DIVISION Injection Zone(s):		
Field Name: Spivey Grabs	WICHITA, KS		
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover 22 Drilling		
Past Operator's License No. 33999/	Contact Person: SHAWN HILDRETH		
	Phone: 281-840-4234		
Past Operator's Name & Address: LINN OPERATING, INC.			
600 TRAVIS STE. 5100, HOUSTON, TEXAS 77002	Date: 12/31/2015		
Title: REGULATORY COMPLIANCE ADVISOR	Signature: Many And drown		
New Operator's License No	Contact Person: YOUSUF CHAUDHARY		
New Operator's Name & Address: ATLAS OPERATING LLC	Phone: 281-893-9400		
15603 KUYKENDAHL RD. STE. 200, HOUSTON, TEXAS 77090	Oil / Gas Purchaser: PIONEER EXPLORATION, LLC		
	Date: 12/31/2015		
Title: VICE PRESIDENT	Signature:		
Acknowledgment of Transfer: The above request for transfer of injection	on authorization, surface pit permit # has been		
	on Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the	e above injection well(s) or pit permit.		
	T		
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:		
Date:	Authorized Signature 2 2016		
DISTRICT EPR 2-2-16	PRODUCTION 2.3.16 UIC VIC		
Mail to: Past Operator New Oper			

Side Two

Must Be Filed For All Wells

	No.: 106433 BANTA 'E'		.,	(INGMAN COUNTY S	FC. 34-30S-8W
_ease Name: .	DIVITA L		* Location:	WITCH COOK IT IS C	
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	1509510042 🗸	1650 N Circle	4950 W Circle	OIL	PROD
2	1509510043 /	660 M SU/FNL	3630 W FED/FWL	OIL	PROD
}	1509510044		3630 W/FWL	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		CORPOREIVER
····		FSL/FNL	FEL/FWL		JAN 14 2016
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION WICHITA, KS
		FSL/FNL	FEL/FWL		"7, KS "SION
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
<u></u>		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/F W L		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	· 	
***************************************		FSL/FNL	FEL/FWL		

^{*} 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

OPERATOR: License # 33999	Well Location:
OPERATOR: License # 33999 Name: LINN OPERATING, INC.	<u>SW Sec. 34 Twp. 30 S. R. 8 </u> East x West
Address 1: 600 TRAVIS STE. 5100	County: KINGMAN
Address 2:	Lease Name: BANTA 'E' Well #:
City: HOUSTON State: TX Zip: 77002 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: SHAWN HILDRETH	
Contact Person: SHAWN HILDRETH Phone: (281) 840-4234	the lease below: SW/4 KANSAS CORPORATION COMMISSION
Email Address: shildreth@linnenergy.com	JAN 14 2016
	CONSERVATION DIVISION WICHITA, KS
Surface Owner Information:	and, KS
Name: SEE ATTACHMENT	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 1:	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: State: Zip:+	
If this form is being submitted with a Form C-1 (Intent) or CR-1 (Cath	odic Protection Borehole Intent) you must supply the surface owners and
the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered a Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	odic Protection Borehole Intent), you must supply the surface owners and hk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered a Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
 the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered a Select one of the following: 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 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 	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ses of the surface owner by filling out the top section of this form and
the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered a Select one of the following: 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 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 that I am being charged a \$30.00 handling fee, payable to the	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this is of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form.
the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered a Select one of the following: 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 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 that I am being charged a \$30.00 handling fee, payable to the	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the bwner(s). To mitigate the additional cost of the KCC performing this is of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 will be returned.

SURFACE OWNERS

Lease Name: **BANTA 'E'**

Legal Description: SW/4 Sec. 34-30S-8W

Owner Name: Leon J. Zoglman & Diane C. Zoglman

Address: 4501 S 295th W

City: Wichita

State: KS

Zip:

<u>67025</u>

Owner Name: Freeport State Bank

Address: **807 W 14th**

City: <u>Harper</u>

State: KS

Zip:

<u>67058</u>

KANSAS CORPORATION COMMISSION

JAN 1 4 2016

CONSERVATION DIVISION

WICHITA, KS

July 2014 010116_Banta_C.pdf 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,

Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 01/01/2016
	Effective Date of Harister.
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 106432
Gas Gathering System:	Lease Name: BANTA 'C'
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	NE/4
Entire Project: Yes No	County: HARPER **ANSAS CORPORATION COMMISSION Production Zone(s): MISSISSIPPI CHAT **ANSAS CORPORATION COMMISSION **ANSAS CORPORATION COMMISSION COMMISSION **ANSAS CORPORATION COMMISSION COMISSION COMMISSION COMISSION COMMISSION COMMISSION
Number of Injection Wells **	Production Zone(s): MISSISSIPPI CHAT
Field Name: Spivey Grabs	14 2010
** Side Two Must Be Completed.	Injection Zone(s): CONSERVATION DIVISION
	WCHITA, KS
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover & R Drilling
Past Operator's License No. 33999 /	Contact Person: SHAWN HILDRETH
Past Operator's Name & Address: LINN OPERATING, INC.	Phone: 281-840-4234
600 TRAVIS STE. 5100, HOUSTON, TEXAS 77002	Date:
Title: REGULATORY COMPLIANCE ADVISOR	Signature: Shaw followers
THE.	Signature. 207
34357	Contact Person: YOUSUF CHAUDHARY
New Operator's License No. 34357	
New Operator's Name & Address: ATLAS OPERATING LLC	Phone: 281-893-9400
15603 KUYKENDAHL RD. STE. 200, HOUSTON, TEXAS 77090	Oil / Gas Purchaser: PIONEER EXPLORATION, LLC
	Date: 12/31/2015
Title: VICE PRESIDENT	Signature:
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been
	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the	
	above injection weil(s) or pit permit.
is acknowledged as	is acknowledged as
v	
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 FEB = 3 2016
DISTRICT EPR A-2-/6 Mail to: Past Operator New Operator	PRODUCTION UIC

Side Two

Must Be Filed For All Wells

	BANTA 'C'		* Location:	HARPER COUNTY S	EC. 4-31S-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)
1	1507710049 🗸		2310 W Circle	OIL	PROD
2	1507700938 🗸	4950 M (SI)/FNL	990 W ED/FWL	OIL	PROD
3	1507720443 🗸	3300 M FS)/FNL	1650/W (E)/FWL	OIL	PROD
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/F W L		
	-	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/F W L		MANSAS CORPORATION COMMISS
		FSL/FNL	FEL/ FW L		JAN 14 2015
		FSL/FNL	FEL/FWL		WIGHTON S
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		F\$L/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/ FW L		
		FSL/FNL	FEL/ FW L		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/F W L		

^{*} 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.

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

Select the corresponding form being filed: C-1 (Intent) CB-1	(Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 33999	Well Location:
Name: LINN OPERATING, INC.	<u>NE</u> Sec. 4Twp. 31 _S. R. 8 East 🔀 West
Address 1: 600 TRAVIS STE. 5100	County: HARPER
Address 2:	DANITA ICI
City: HOUSTON State: TX Zip: 77002 +	If filing a Form T 1 for multiple wells an a loose anter the local description of
Contact Person: SHAWN HILDRETH	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Contact Person: SHAWN HILDRETH Phone: (281) 840-4234 Fax: () Email Address: shildreth@linnenergy.com	the lease below: NE/4 KANSAS CORPORATION COMMISSION JAN 1
Email Address: Shildreth@linnenergy.com	IAA.
Email Address.	
Surface Owner Information:	WICHITA, KS
Name: LEON J & DIANE C ZOGLMAN Address 1: 4501 S 295th ST WEST	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:	county, and in the real estate property tax records of the county treasurer.
City: CHENEY State: KS Zip: 67025 +	
 are preliminary non-binding estimates. The locations may be entered Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be 	Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form to being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.
☐ I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this as of the surface owner by filling out the top section of this form and
	e NOC, which is enclosed with this form.
	ng fee with this form. If the fee is not received with this form, the KSONA-1
If choosing the second option, submit payment of the \$30.00 handlin	ng fee with this form. If the fee is not received with this form, the KSONA-1P-1 will be returned.

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 with this form.
Oil Lease: No. of Oil Wells 1 **	Effective Date of Transfer: 01/01/2016
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 106300
Gas Gathering System:	
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N /	S Line NE _ NE _ Sec33 _Twp30S_ R8 E 🗸 W
feet from E /	W Line Legal Description of Lease:
Enhanced Recovery Project Permit No.:	NE NE SEC. 33
Entire Project: Yes No	County: KINGMAN
Number of Injection Wells **	Production Zone(s): MISSISSIPPI CHAT
Field Name: Spivey Grabs	
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul,	feet from E / W Line of Section
Type of Pit: Emergency Burn S	
Past Operator's License No. 33999 /	Contact Person: SHAWN HILDRETH Contact Person: SHAWN HILDRETH Contact Person: Phone: 281-840-4234
Past Operator's Name & Address:LINN OPERATING, IN	NC. Phone: 281-840-4234
600 TRAVIS STE. 5100, HOUSTON, TEXAS 7	7002 Date: 12/31/2015 CONSERVATION OF WICKISTON DE
Title: REGULATORY COMPLIANCE ADVISOR	Phone: 281-840-4234
New Operator's License No. 34357	Contact Person: YOUSUF CHAUDHARY
New Operator's Name & Address: ATLAS OPERATING LLC	
15603 KUYKENDAHL RD. STE. 200, HOUSTON, TEXAS 7	7000
	Oil / Gdo : diolidoo
	Date: 12/31/2015
Title: VICE PRESIDENT	Signature:
Acknowledgment of Transfer: The above request for transfer.	nsfer of injection authorization, surface pit permit # has been
noted, approved and duly recorded in the records of the Kan	sas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownersh	ip interest in the above injection well(s) or pit permit.
is ack	knowledged 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
	-2-16 PRODUCTION 2.3.16 UIC FEB - 3 2016
Mail to: Past Operator	Now Operator

Must Be Filed For All Wells

* Lease Name:	TJADEN GAS UNIT		* Location: 	KINGMAN COUNTY	SEC. 33-30S-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
1	15095017700001 🗸	660 \$ Circle	660 W Circle	OIL	PROD
		FSL/FNL	FEL/F W L		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	±	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/F W L		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		KAWSAG
		FSL/FNL	FEL/F WL		KANSAS CORPORATION COMMISSIO
		FSL/FNL	FEL/FWL		CONSERVATION 2016
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL			
		FSL/FNL			
			FEL/FWL		
			FEL/FWL		

^{*} 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.

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

OPERATOR: License # 33999	Well Location:			
OPERATOR: License # 33999 Name: LINN OPERATING, INC.				
Address 1: 600 TRAVIS STE. 5100	County: KINGMAN			
Address 2:	Lease Name: TJADEN GAS UNIT Well #. 1			
City: HOUSTON State: TX Zip: 77002 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below:			
Contact Person: SHAWN HILDRETH				
Phone: (281) 840-4234 Fax: ()				
Phone: (281) 840-4234	JAN 14 TOMMISSIC			
	CONSERVATION DO 16			
	CONSERVATION DIVISION			
Surface Owner Information: Name: JON F. MESSENGER, TRUSTEE				
Name: JON F. MESSENGER, TRUSTEE Address 1: 1728 SE 30 ST	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.			
Address 2:				
the KCC with a plat showing the predicted locations of lease roads	Cathodic Protection Borehole Intent), you must supply the surface owners and s, tank batteries, pipelines, and electrical lines. The locations shown on the plat red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
the KCC with a plat showing the predicted locations of lease roads	s, tank batteries, pipelines, and electrical lines. The locations shown on the plat			
the KCC with a plat showing the predicted locations of lease roads are preliminary non-binding estimates. The locations may be ente Select one of the following: I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will	s, tank batteries, pipelines, and electrical lines. The locations shown on the plat red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. tice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this			
the KCC with a plat showing the predicted locations of lease roads are preliminary non-binding estimates. The locations may be ente Select one of the following: I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, the land upon which the surface owner(start in the surface owner). I have not provided this information to the surface owner(start in the surface owner) as the surface owner in the surface owner is the surface owner in the surface owner in the surface owner is the surface owner in the surface owner in the surface owner is the surface owner in the surface owner in the surface owner is the surface owner in th	s, tank batteries, pipelines, and electrical lines. The locations shown on the plat red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. tice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this			
the KCC with a plat showing the predicted locations of lease roads are preliminary non-binding estimates. The locations may be enterested to be of the following: I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, the land upon which the surface owner(see KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and additional to the surface owner of the surface owner or owner or owner owner.	tice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, the plat(s) required by this fax, and email address. 1) I acknowledge that, because I have not provided this information, the ce owner(s). To mitigate the additional cost of the KCC performing this form and the KCC, which is enclosed with this form.			
the KCC with a plat showing the predicted locations of lease roads are preliminary non-binding estimates. The locations may be enterested one of the following: I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, the Lawrence of the surface owner(see KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addithat I am being charged a \$30.00 handling fee, payable to	tice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this fax, and email address. S). I acknowledge that, because I have not provided this information, the ce owner(s). To mitigate the additional cost of the KCC performing this dress of the surface owner by filling out the top section of this form and of the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 in CP-1 will be returned.			

Kansas Corporation Commission Oil & Gas Conservation Division

010116_C_J_Boyle_K.pdf Form T-1
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:	indea wan ans ioni.			
Oil Lease: No. of Oil Wells **	Effective Date of Transfer: 01/01/2016			
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 106292			
Gas Gathering System:	Lease Name: C. J. BOYLE K			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line	Legal Description of Lease:			
feet from E / W Line				
Enhanced Recovery Project Permit No.:	NW/4 County: KINGMAN Production Zone(s): MISSISSIPPI CHAT KANSAS CORPORATION COMM			
Entire Project: Yes No				
Number of Injection Wells**	Production Zone(s): MISSISSIPPI CHAT			
Field Name: Spivey Grabs	Injection Zone(s): co_{NSS}			
** Side Two Must Be Completed.	Injection Zone(s): $\frac{c_{ONSERVATION}}{WICHITALAS} \frac{2015}{AS}$			
Surface Pit Permit No.:	feet from N / S Line of Section			
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section			
Type of Pit: Emergency Burn Settling				
Past Operator's License No. 33999 /	Contact Person: SHAWN HILDRETH			
Past Operator's Name & Address: LINN OPERATING, INC.	Phone: 281-840-4234 Date: 12/31/2015			
600 TRAVIS STE. 5100, HOUSTON, TEXAS 77002				
Title: REGULATORY COMPLIANCE ADVISOR	Signature: Shaw Hildren			
New Operator's License No	Contact Person: YOUSUF CHAUDHARY			
New Operator's Name & Address: ATLAS OPERATING LLC	Phone: 281-893-9400			
15603 KUYKENDAHL RD. STE. 200, HOUSTON, TEXAS 77090	Oil / Gas Purchaser: PIONEER EXPLORATION, LLC			
	Date: 12/31/2015			
Title: VICE PRESIDENT	Date:			
Title: VICE FRESIDENT	Signature: !			
				
Acknowledgment of Transfer: The above request for transfer of injection				
	on Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the	e 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.:			
. Hotominerada action.	permitted by No.:			
Date:	Date:			
Date:	Authorized Signature			
DISTRICT EPR 2-2-16	PRODUCTION 2.3.16 UC EB - 3 2016			
Mail to: Past Operator New Operator	rator District			

Must Be Filed For All Wells

Lease Name	C. J. BOYLE K		* Location: K	INGMAN COUNTY S	SEC. 34-30S-8W
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	C. J. Boyle K 1509501165	990 N FSL/FN)	Circle 1650 W FELEWD	Oil & Gas	PROD
3	C. J. Boyle K 15095190130003	660 \$ FSLEN	660 E FEL/W	Oil & Gas	PROD
		FSL/FNL	FEL/F W L		
		FSL/FNL	FEL/F W L		
****		FSL/FNL	FEL/F W L		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/F W L	·	KANSAS CORPORATION COMM
		FSL/FNL	FEL/F W L		JAN 14 2016
		FSL/FNL	FEL/FWL		MICALION DU
		FSL/FNL	FEL/F W L		
		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		<u> </u>
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		···
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/F W L		
		FSI /FNI	FEL/FWL		

^{*} 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.

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

OPERATOR: License # 33999	Well Location:		
Name: LINN OPERATING, INC.			
ddress 1: 600 TRAVIS STE. 5100	County: KINGMAN		
Address 2:	0 1 00/4 5 1/		
Sity: HOUSTON State: TX Zip: 77002 +	If filing a Farm T 1 for multiple wells are already the level of a minimum of		
contact Person: SHAWN HILDRETH	the lease below:		
hone: (281) 840-4234 Fax: ()	NW/4 KANSAS CORPORATION COM		
hone: (281) 840-4234 Fax: () mail Address: shildreth@linnenergy.com	— CORPORATION COM		
100	717 / 4 2010		
urface Owner Information:	TIOERVATIO.		
JOHO LLC	WICHITA, KS		
ddress 1: 1728 SE 30 ST	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		
ddress 2:			
this form is being submitted with a Form C.1 (Intent) or CP.1 (Co	athodia Protection Parabala Intent), you must sumply the surface sumply		
ne KCC with a plat showing the predicted locations of lease roads,	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
ne KCC with a plat showing the predicted locations of lease roads, re preliminary non-binding estimates. The locations may be entere	tank batteries, pipelines, and electrical lines. The locations shown on the plat		
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be enterestelect one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will the subject well in the subject well in the subject well is or will the subject well in the subject w	tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. 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 being filed is a Form C-1 or Form CB-1, the plat(s) required by this		
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ne KCC with a plat showing the predicted locations of lease roads, re preliminary non-binding estimates. The locations may be enterelelect one of the following: 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; and 3) my operator name, address, phone number, father I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the	tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. The locations shown on the plated on the Form C-1 plat, or a separate plat may be submitted. The locations shown on the plated on the Form C-1 plat, or a separate plat may be submitted. The locations shown on the plated on 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 ax, and email address. The locations shown on the plated on the surface be sufface be sufface on the surface of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.		
ne KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be enterestelect one of the following: 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; and 3) my operator name, address, phone number, fare I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address, I am being charged a \$30.00 handling fee, payable to the choosing the second option, submit payment of the \$30.00 handling the second option, submit payment of the \$30.00 handling the second option.	tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. The locations shown on the plated on the Form C-1 plat, or a separate plat may be submitted. The locations shown on the plated on the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form orm being filled is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address. The locations shown on the plated on the surface be sufface be located: 1) a copy of the Form CB-1, Form T-1, or Form CB-1, Form T-1, or Form CB-1, the plat(s) required by this ax, and email address. The locations shown on the plated on the surface be sufface be located: 1) a copy of the Form CB-1, Form T-1, or Form T-1, or Form T-1, or Form CB-1, Form T-1, or Form CB-1, Form T-1, or Form T-1, o		

010116_Boyle_N.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:	ubmitted with this form.		
Oil Lease: No. of Oil Wells **	Effective Date of Transfer: 01/01/2016		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 106436		
Gas Gathering System:	Lease Name: BOYLE N		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	NW NE NE		
Entire Project: Yes No	County: KINGMAN		
Number of Injection Wells **	ANGCICCIPPI CHAT		
Field Name: Spivey Grabs	CONSERVATION 2016		
** Side Two Must Be Completed.	Production Zone(s): MISSISSIPPI CHAT CONSERVATION DIVISION Injection Zone(s): WICHITA, KS		
0.6. 5.5.			
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. 33999 /	Contact Person: SHAWN HILDRETH		
Past Operator's Name & Address: LINN OPERATING, INC.	Phone: 281-840-4234		
600 TRAVIS STE. 5100, HOUSTON, TEXAS 77002	Date: 12/31/2015		
Title: REGULATORY COMPLIANCE ADVISOR	Make a death		
Title: NEGGEATORY COMPLIANCE ADVISOR	Signature: ST GOV THE MOVE		
New Operator's License No.	Contact Person: YOUSUF CHAUDHARY		
New Operator's Name & Address: ATLAS OPERATING LLC	Phone: 281-893-9400		
15603 KUYKENDAHL RD. STE. 200, HOUSTON, TEXAS 77090	Oil / Gas Purchaser: PIONEER EXPLORATION, LLC		
	Date: 12/31/2015		
Title: VICE PRESIDENT	Signature:		
Acknowledgment of Transfer: The above request for transfer of injection	ction authorization, surface pit permit #has been		
noted, approved and duly recorded in the records of the Kansas Corpora	ation Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in	n 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			
Permit No.: Recommended action:	permitted by No.:		
Dato	— Date:		
Date:	Date:		
DISTRICT EPR 2-2-/6	PRODUCTION 2.3.16 UIC UIC		
	peratorDistrict		

Must Be Filed For All Wells

ease Name:	BOYLE N			cauon:	INGMAN COUNTY S	
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)
	1509520876 🗸	4950 M FSD FNL	990 W E	Circle ED/FWL	OIL	PROD
		FSL/FNL	F	EL/FWL		
		FSL/FNL	F	EL/FWL		
		FSL/FNL	F	EL/FWL		
		FSL/FNL	F	FEL/FWL		KANO
		FSL/FNL	F	FEL/FWL		KANSAS CORPORATION COM
	:	FSL/FNL	F	FEL/FWL		JAN 14 2016
		FSL/FNL	F	EL/FWL	***************************************	WICHITON DIVID
		FSL/FNL	F	EL/FWL		
		FSL/FNL	F	EL/FWL		
		FSL/FNL	F	EL/FWL		
		FSL/FNL	F	FEL/FWL		
		FSL/FNL	F	FEL/F W L		
		FSL/FNL	F	FEL/FWL		
		FSL/FNL	F	FEL/FWL		
		FSL/FNL	F	FEL/F W L		
		FSL/FNL	F	EL/FWL	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		FSL/FNL	F	EL/FWL		
		FSL/FNL	F	FEL/FWL	•	
		FSL/FNL		FEL/F W L		
			·			
		FSL/FNL				
			F			

^{*} 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.

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

OPERATOR: License # 33999	Well Location:				
Name: LINN OPERATING, INC.	NW_NE_NE_Sec. 34 Twp. 30 S. R. 8 East 🗷 West				
Address 1: 600 TRAVIS STE. 5100					
Address 2:	Lease Name: BOYLE N Well #: 2				
City: HOUSTON State: TX Zip: 77002 +					
Contact Person: SHAWN HILDRETH					
Phone: (281) 840-4234 Fav. ()	TANSAS CORPORATION COLUMN				
Phone: (281) 840-4234 Fax: ()	JAN 1 4 2016				
Email Address: 37	CONSEDUCE 2016				
	CONSERVATION DIVISION WICHITA, KS				
Surface Owner Information:					
Name: JOHO LLC	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 1: 1728 SE 30 ST	owner information can be found in the records of the register of deeds for th				
Address 2:	county, and in the real estate property tax records of the county treasurer.				
City: KINGMAN State: KS Zip: 67068 +					
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Ca	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered. Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form	athodic Protection Borehole Intent), you must supply the surface owners and 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. Dee 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 being filed is a Form C-1 or Form CB-1, the plat(s) required by this				
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Kansas Corporation Commission Oil & Gas Conservation Division

100115_Harper_NW.pdf

Form T-1 July 2014 be Typed

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. (Total 5) Check Applicable Boxes: 10/1/2015 Oil Lease: No. of Oil Wells Effective Date of Transfer: _ Gas Lease: No. of Gas Wells 136271 KS Dept of Revenue Lease No.: Gas Gathering System: Lease Name: HARPER Saltwater Disposal Well - Permit No.: _ NE SE NE NW Sec. 3 Twp. 9S R. 20 F E W feet from N / S Line Spot Location: ___ Legal Description of Lease: 4317 N, 2946 W from SE corner _ feet from 🔲 E / 🗌 W Line Enhanced Recovery Project Permit No.: County: LEAVENWORTH Entire Project: Yes No KCC WICHITA Number of Injection Wells _ Production Zone(s): M&Louth Field Name: Eq5 ton Injection Zone(s): ** Side Two Must Be Completed. feet from N / S Line of Section Surface Pit Permit No.: _ (API No. if Drill Pit, WO or Haul) E / W Line of Section feet from の 凡 🔲 Drilling Haul-Off Type of Pit: Emergency Burn Settling Workover Past Operator's License No. 32316/ Contact Person: GLOBAL ENERGY SOLUTIONS, INC Past Operator's Name & Address: _ Received KANSAS CORPORATION COMMISSION 10 Box 309 Date: Mc Louth Ks 2015 Signature: Title: CONSERVATION DIVISION WICHITA, KS 35204 **ELLEN RAY** Contact Person: New Operator's License No. -New Operator's Name & Address: MSP OIL, LLC (MIKE HARPER) Phone: 785-220-2437 Oil / Gas Purchaser: MACCLASKEY OIL 25511 LECOMPTON RD Date: 10/1/2015 WINCHESTER, KS 66097 **OWNER/OPERATOR** Signature: _

EP&R 2-2-16 PRAGE FEB - 3 2016

Side Two

Must Be Filed For All Wells

* Lease Name:	HARPER		* Location:	NE SE NE NW 4317 N, 29	946 W from SE corner
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
5	15-103-20051 V	4317 Sufficient	2946 FE FWL	oil	PROD
		FSL/FNL	FEL/FWL		
	والمنافرة والمنا	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	4-04-04-04-04-04-04-04-04-04-04-04-04-04	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL	KCC WICHIT	A
		FSL/FNL		FEB 0 1 2016	
		FSL/FNL		RECEIVED	i
			FEL/FWL		
			FEL/FWL		Received AS CORPORATION COMMISSION
					OCT 0 5 2015
***************************************		FSL/FNL			CONSERVATION DIVISION WICHITA, KS
		FSL/FNL			WICHITA. KS
		FSL/FNL	FEL/FWL	A 1 4 7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		**************************************
		FSL/FNL	FEL/FWL		

^{*} 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.

Side Two

Must Be Filed For All Wells

Well No. API No.		Footage from Section Line		Type of Well	Well Status
AACM LACY	(YR DRLD/PRE 67)	(i.e. FSL = Feet fro		(Oil/Gas/INJ/WSW)	(PROD/TA'D/Abandoned
<u>1</u>	15-103-21-286	4198 FSL/FNL	3038 Circle FEL/FWL	oil	Prod
£2	15-103-21-287	4300 FSL/FNL	3350 FEL/FWL	oil	Prod
-3	15-103-21-288	4041 FSL/FNL	3514 FEL/FWL	oil	Prod
4	15-103-20092 J	4306 SUFFIL	3577 EFWL	oil	Prod .
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		-
		FSL/FNL	FEL/FWL		
		FSL/FNI.	FEL/FWL	KANSAS CORPORATIO	red
		FSL/FNL	FEL/FWL	JUL 09	2016
·		FSL/FNL	FEL/FWL	CONSERVATION !	
		FSL/FNL	FEL/FWL		S
		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	National Action of the Control of th	
		FSL/FNL	FEL/FWL		
	-	FSL/FNL	FEL/FWL		•
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		•
	- Marie Land	FSL/FNL	FEL/FWL		

KOC WICHITA

FEB 0.1 20%

KECEWEL

Received KANSAS CORPORATION COMMISSION

OCT 0 5 2015

CONSERVATION DIVISION WICHITA, KS

5 8 1 1 2015R05811 Doc #: STACY R. DRISCOLL/REGISTER OF DEEDS

LEAVENWORTH COUNTY 2

RECORDED ON

07/24/2015 09:52AM RECORDING FEE: 20.00

INDEBTEDNESS: 0.00 PAGES: 2

Release Of Oil And Gas Lease

STATE OF KANSAS

COUNTY OF JOHNSON

KNOW ALL MEN BY THESE PRESENTS, that the undersigned does hereby release, relinquish, surrender, and forever quitclaim to the hereinafter named Lessors, their heirs, successors and Assigns, as their interest may appear, any and all right, title and interest whatsoever presently owned by the undersigned in and to the lands described below by virtue of the following described Oil and Gas Lease, to-wit:

That certain oil and gas lease, dated February 8, 2003, between Michael C. Harper, Lessor, and KLM Exploration Company, Inc., Lessee, as recorded at book 871, page 2092 in the Leavenworth County Register of Deeds.

Insofar as said Oil and Gas Lease covers the following described land:

a tract in Section 3, Township 9 South, Range 20 East of the 6th P.M. more particularly described as being in the NE/4 NW/4 with p.o.b. being 1550.62 feet East of the Northwest corner of the NW/4; thence ease along the North line of said NW/4 to the East line of the NW/4; thence South along the East line of the NE/4 NW/4 to the Southeast corner of the NE/4 NW/4; thence West along the South line of the North half of the NW/4 to a point 1148 feet West of the Southwest corner of the North half; thence North 742 feet along the West line of the NE/4 NW/4; thence East parallel to the North Section line 502 feet; thence North parallel to the East line of the NE/4 NW/4 541 feet to the p.o.b. on the North Section line, containing 38 acres more or less

IN WITNESS WHEREOF, this instrument is executed on this 2015 day of

RECEIVED

Received KANSAS CORPORATION COMMISSION

OCT 05 2015

CONSTRUCTION DIVISION MICHIEL KS

Michael Harper

LEASE LEGAL DESCRIPTION ATTACHMENT

A tract in the NE/4 NW\4 with p.o. b. being 1650.62 feet East of the Northwest corner of the NW/4; thence east along the North line of said NW/4 to the East line of the NW/4; thence South along the East line of the NE/4 NW/4 to the Southeast corner of the NE/4 NW/4; thence West along the South line of the Northhalf of the NW/4 to a point 1148 feet West of the Southwest corner of the North half; thence North 742 feet along the West line of the NE/4 NW/4; thence East parallel to the North Section line 502 feet; thence North parallel to the East line of the NE/4 NW/4 541 feet to the p.o. b on the North Section line Containing 38 acres m/l.

FEB 0.1 2016
RECEIVED

Received
KANSAS CORPORATION COMMISSION

OCT 0 5 2015

CONSERVATION DIVISION WICHITA, KS

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 # 35204	
MOD OIL 11 O	Well Location:
Name: MSP OIL, LLC	NE_SE_NE_NW Sec. 3 Twp. 9 S. R. 20 X East West
Address 1: 25511 LECOMPTON RD	County: LEAVENWORTH
Address 2:	Lease Name: HARPER A (MIKE HARPER) PREVIOUS FUHR 2 Well #: 5
City: WINCHESTER State: KS Zip: 66097 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: ELLEN RAY	the lease below:
Phone: (785) 220-2437 Fax: ()	a sampa "
Email Address: eray73@hotmail.com	
0.1	2006
Surface Owner Information: Name: MICHAEL HARPER Address 1: 25511 LECOMPTON RD	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.
Address 2:	Godiny, and in the road obtains property and read the second second
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and a batteries, pipelines, and electrical lines. The locations shown on the plat in 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 A owner(s) of the land upon which the subject well is or will be lo CP-1 that I am filing in connection with this form; 2) if the form to form; and 3) my operator name, address, phone number, fax, and	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ceing filed is a Form C-1 or Form CB-1, the plat(s) required by this
KCC will be required to send this information to the surface ow	cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.
10/1/2015 Date: Signature of Operator or Agent:	had Tours OWNER/OPERATOR Title:

Received KANSAS CORPORATION COMMISSION

010116 State.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 Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: __104524 Gas Gathering System: Lease Name: State Saltwater Disposal Well - Permit No.: __ Spot Location: _ feet from N / S Line Legal Description of Lease: See Attachment feet from ___ E / __ W Line SW NW Enhanced Recovery Project Permit No.: ___ County: Barton Entire Project: Yes No Number of Injection Wells Production Zone(s): LKC, Arbuckle Field Name: Chase-Silica Injection Zone(s):_ ** Side Two Must Be Completed. Surface Pit Permit No.: _ feet from N / S Line of Section (API No. if Drill Pit, WO or Haul) E / W Line of Section BP - Drilling Type of Pit: Emergency Burn Settling Workover Haul-Off Leon Rodak Past Operator's License No. Contact Person: Past Operator's Name & Address: Murfin Drilling Company, Inc Phone: 316 267-3241 250 S Water Suite 300 Wichita, KS 67202 Title: Vice President Signature: New Operator's License No. 3911√ Robin L. Austin Contact Person: New Operator's Name & Address: RAMA Operating Co., Inc Phone: 620 234-5191 P.O. Box 159 Stafford, KS 67578 Oil / Gas Purchaser: Vice President Title: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #_ 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 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 _____. Recommended action: permitted by No.: _ Date: Authorized Signature DISTRICT 4PRODUCTION Mail to: Past Operator **New Operator** District

Side Two

Must Be Filed For All Wells

* Lease Name:	* Lease Name:State		* Location:S	* Location: See Attachment			
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)		
1	15-009-30316√	2938 FSD FNL	750 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				
		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				
		FSL/FNL	FEL/FWL				
	-	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		WOUTA		
		FSL/FNL	FEL/FWL		KCC WICHITA		
		FSL/FNL	FEL/FWL				
					RECEIVED		
		FSL/FNL					

^{*} 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 # 30606	Well Location:
Name: Murfin Drilling Company, Inc	
Address 1: 250 S Water Suite 300	County: Barton
Address 2:	Lease Name: State Well #: 1
City: Wichita State: KS Zip: 67202 +	
Contact Person: Leon Rodak	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Phone: (316) 267-3241 Fax: ()	_
Email Address:	
Surface Owner Information:	
Name: See Attachment	When filing a Form T.1 involving multiple surface surpage attack as additional
Address 1:	sheet listing all of the information to the left for each surface owner. Surface
Address 2:	owner information can be found in the records of the register of deeds for the
City: State: Zip:+	
Only: trace: zip +	
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Care of the control of the con	athodic Protection Borehole Intent), you must supply the surface owners and
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered. Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notion owner(s) of the land upon which the subject well is or will	athodic Protection Borehole Intent), you must supply the surface owners and 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. The locations shown on the plat was defined in 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
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered. Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notion owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, form; and 3) my operator name, address, phone number, form; I have not provided this information to the surface owner(s) KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address.	athodic Protection Borehole Intent), you must supply the surface owners and 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. The locations shown on the plat was defined in 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
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered. Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, form; and 3) my operator name, address, phone number, form; and 1 have not provided this information to the surface owner(s) KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and add that I am being charged a \$30.00 handling fee, payable to the choosing the second option, submit payment of the \$30.00 handling the second option is the second option of the second	athodic Protection Borehole Intent), you must supply the surface owners and 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. The control of 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 ax, and email address. 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 the KCC, which is enclosed with this form.
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, factorized in the surface owner (s) KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and add that I am being charged a \$30.00 handling fee, payable to the surface of the surface owner (s) that I am being charged a \$30.00 handling fee, payable to the surface owner (s) that I am being charged a \$30.00 handling fee, payable to the surface owner (s) that I am being charged a \$30.00 handling fee, payable to the surface owner (s) that I am being charged a \$30.00 handling fee, payable to the surface owner (s) that I am being charged a \$30.00 handling fee, payable to the surface owner (s) that I am being charged a \$30.00 handling fee, payable to the surface owner (s) that I am being charged a \$30.00 handling fee, payable to the surface owner (s) that I am being charged a \$30.00 handling fee, payable to the surface owner (s) that I am being charged a \$30.00 handling fee, payable to the surface owner (s) that I am being charged a \$30.00 handling fee, payable to the surface owner (s) that I am being charged a \$30.00 handling fee, payable to the surface owner (s) that I am being charged a \$30.00 handling fee, payable to the surface owner (s) that I am being charged a \$30.00 handling fee, payable to the surface owner (s) that I am being charged a \$30.00 handling fee, payable to the surface owner (s) that I am being charged a \$30.00 handling fee, payable to the surface owner (s) the surface owner (athodic Protection Borehole Intent), you must supply the surface owners and 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. The locations shown on the plat ed on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. The located is a submitted. The locations shown on the plat ed on the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filled is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address. 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 the KCC, which is enclosed with this form. The locations shown on the plat experience is a surface owner by the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.

KCC - Conservation Division, 266 N Main St, Ste 220, Wichita, KS 67202-1513

KCC WICHITA

AN 22

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KCC WICHITA JAN 22 266 RECEIVED

Barton County, Kansas EXHIBIT "A"

Attached to and made a part of that certain Assignment, Bill of Sale and Conveyance dated June 24, 2002 with an Effective Time of 7:00 a.m. June 1, 2002. LESSOR LESSEE DESCRIPTION RECORDED

State of Kansas

April 16, 1930

DATE

.

T. C. Melrose

excepting any islands on which patents have been issued, situated within the meander and defined Barton County, Kansas W/2 of Section 4 and the E/2 NE/4 of Section 5. except actual accretions), within and through the government survey of 1866-1871 (being all land Township 20 South, Range 11 West
Sections 4 and 5: covering all that portion of the lines of the said river, as shown by the U.S. bed of the Arkansas River and islands lying therein,

> General Records Book 39, Page 592

Attachment to the KSONA-1

Surface Owner Information:

State of Kansas c/o Kansas Dept of Revenue Oil and Gas Royalties 915 SW Harrison St Topeka, KS 66625

And

Steve Soeken 198 SE 120th Ave Ellinwood, KS 67526

KCC WICHITA
AN 22 LAN
RECEIVED

010116_Muir_E.pdf

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 . Effective Date of Transfer: __01/01/2016 Gas Lease: No. of Gas Wells _ KS Dept of Revenue Lease No.: 204829 Gas Gathering System: Lease Name: MUIR E Saltwater Disposal Well - Permit No.: _ - NW - NW - SE Sec. 21 Twp. 31S R. 9 F ✓ W feet from N / S Line Legal Description of Lease: _ feet from | E / SEC. 21-31S-9W Enhanced Recovery Project Permit No.: Entire Project: Yes No County: _HARPER Number of Injection Wells MISSISSIPPI CHAT Production Zone(s): Field Name: Spivey Grabs Injection Zone(s): ** Side Two Must Be Completed. Surface Pit Permit No.: _ feet from N / S Line of Section (API No. if Drill Pit, WO or Haul) feet from E / W Line of Section Type of Pit: Emergency Settling Burn Haul-Off Workover 33999 SHAWN HILDRETH Past Operator's License No. LINN OPERATING, INC. Phone: 281-840-4234 Past Operator's Name & Address: 600 TRAVIS STE. 5100, HOUSTON, TEXAS 77002 12/31/2015 Title: REGULATORY COMPLIANCE ADVISOR New Operator's License No. 34357 YOUSUF CHAUDHARY Contact Person: New Operator's Name & Address: ATLAS OPERATING LLC Phone: 281-893-9400 15603 KUYKENDAHL RD. STE. 200, HOUSTON, TEXAS 77090 Oil / Gas Purchaser: PIONEER EXPLORATION, LLC Date: 12/31/201 VICE PRESIDENT Acknowledgment of Transfer: The above request for transfer of injection authorization, sufface pit permit # 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. the new operator and may continue to inject fluids as authorized by the new operator of the above named lease containing the surface pit ... Recommended action: permitted by No.: __ Date: Authorized Signature DISTRICT. Mail to: Past Operator _ **New Operator** District

Side Two

Must Be Filed For All Wells

	No.: 204829		.	HARPER COUNTY SI	EC 21-31S-0W
Lease Name:	MOINE		* Location:	IARPER COUNTY 31	EG. 21-313-344
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
1	1507720097	2310 K Circle	2310 X Circle	GAS	PROD
···		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/F W L		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	<u> </u>	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		CONSERVATION
		FSL/FNL	FEL/FWL		NSERVAT CUIF
		FSL/FNL	FEL/FWL		'^, KS '^O/ON
		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/F W L		
		FSL/FNL	FEL/F WL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/ FW L		
		FSL/FNL	FEL/FWL		

^{*} 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.

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

OPERATOR: License # 33999	Well Location:
Name: LINN OPERATING, INC.	
Address 1: 600 TRAVIS STE. 5100	
Address 2:	Lease Name: MUIR E Well #: 1
tity: HOUSTON State: TX Zip: 77002 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
ontact Person: SHAWN HILDRETH	the lease below:
hone: (281) 840-4234 Fax: ()	CORPORATION
mail Address: shildreth@linnenergy.com	
	JAN 14 2016
	CONSERVATION DIVISION WICHITA, KS
Surface Owner Information:	
ame: SEE ATTACHMENT	
ddress 1:	owner information can be found in the records of the register of deeds for the
ddress 2:	
City:	
the KCC with a plat showing the predicted locations of lease ro	1 (Cathodic Protection Borehole Intent), you must supply the surface owners and pads, tank batteries, pipelines, and electrical lines. The locations shown on the plat
the KCC with a plat showing the predicted locations of lease ro are preliminary non-binding estimates. The locations may be e	1 (Cathodic Protection Borehole Intent), you must supply the surface owners and
he KCC with a plat showing the predicted locations of lease roare preliminary non-binding estimates. The locations may be estimated one of the following: I certify that, pursuant to the Kansas Surface Owner owner(s) of the land upon which the subject well is or	1 (Cathodic Protection Borehole Intent), you must supply the surface owners and pads, tank batteries, pipelines, and electrical lines. The locations shown on the plat entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Notice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
ne KCC with a plat showing the predicted locations of lease rore preliminary non-binding estimates. The locations may be excelect one of the following: I certify that, pursuant to the Kansas Surface Owner owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) if t form; and 3) my operator name, address, phone numb I have not provided this information to the surface owner KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and	1 (Cathodic Protection Borehole Intent), you must supply the surface owners and pads, tank batteries, pipelines, and electrical lines. The locations shown on the plat entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Notice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
the KCC with a plat showing the predicted locations of lease for preliminary non-binding estimates. The locations may be estelect one of the following: I certify that, pursuant to the Kansas Surface Owner owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) if t form; and 3) my operator name, address, phone numb I have not provided this information to the surface own KCC will be required to send this information to the stask, I acknowledge that I must provide the name and that I am being charged a \$30.00 handling fee, payable	1 (Cathodic Protection Borehole Intent), you must supply the surface owners and bads, tank batteries, pipelines, and electrical lines. The locations shown on the plat entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Notice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this er, fax, and email address. er(s). I acknowledge that, because I have not provided this information, the urface owner(s). To mitigate the additional cost of the KCC performing this I address of the surface owner by filling out the top section of this form and the tothe KCC, which is enclosed with this form. thandling fee with this form. If the fee is not received with this form, the KSONA-1
ne KCC with a plat showing the predicted locations of lease for re preliminary non-binding estimates. The locations may be excelect one of the following: I certify that, pursuant to the Kansas Surface Owner owner(s) of the land upon which the subject well is or CP-1 that I am filing in connection with this form; 2) if t form; and 3) my operator name, address, phone numb I have not provided this information to the surface own KCC will be required to send this information to the su task, I acknowledge that I must provide the name and that I am being charged a \$30.00 handling fee, payable choosing the second option, submit payment of the \$30.00 to	1 (Cathodic Protection Borehole Intent), you must supply the surface owners and bads, tank batteries, pipelines, and electrical lines. The locations shown on the plat entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Notice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this iter, fax, and email address. er(s). I acknowledge that, because I have not provided this information, the surface owner(s). To mitigate the additional cost of the KCC performing this I address of the surface owner by filling out the top section of this form and the tothe KCC, which is enclosed with this form. thandling fee with this form. If the fee is not received with this form, the KSONA-1 form CP-1 will be returned.

SURFACE OWNERS

Lease Name: MUIR E 1

Legal Description: NW NW SE SEC. 21 31S 9W

Owner Name: VICKI J LUKENS REVOCABLE TRUST

Address: 507 N CEDAR

City: MEDICINE LODGE

State: KS

Zip:

<u>67104</u>

Owner Name: <u>TEDDY G LUKENS REVOCABLE TRUST</u>

Address: 507 N CEDAR

City: MEDICINE LODGE

State: KS

Zip:

<u>67104</u>

KANSAS CORPORATION COMMISSION

JAN 14 2016

CONSERVATION DIVISION,

WICHITA, KS

Kansas Corporation Commission Oil & Gas Conservation Division

090815_City_Coffeyville.pdf If 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,

Check Applicable Boxes: MUST be submitted	ed with this form.
Oil Lease: No. of Oil Wells 11 80il	Effective Date of Transfer: September 8, 2015
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.:
Gas Gathering System:	Lease Name: City of Coffeyville
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	N/2 - NE/4 Sec. 8 Twp. 34 R. 17
feet from E / W Line	Legal Description of Lease: The North half of the Northeast quarter (N/2 NE/4) of Section 8,
Enhanced Recovery Project Permit No.: E 2/770	Township 34, Range 17 East, Except lots 7 and 8, Airport Industrial Park City of Coffeyville, KS 67.3 Acres MOL
Entire Project: Yes No Number of Injection Wells 3	County: Montgomery
, , , , , , , , , , , , , , , , , , , ,	Production Zone(s): Red Fork
Field Name: Cherryvale-Coffeyville	Injection Zone(s): N/A
** Side Two Must Be Completed.	RECO
Surface Bit Bermit No. N/A	THE CHARLES TO SHOW TO SHOW THE PROPERTY OF TH
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. Unknown 325/2 Exp. 9/36/6	22eontact Person:n/a
Past Operator's Name & Address: N/a Foster Gas Corp.	Phone: n/a
	Date:
Title: N/A	signature: New Lease agreement
35217 1	- Bryan Allen
New Operator's License No. 35217 MB Haldings H.O.	Contact Person: Bryan Allen
New Operator's Name & Address: MB Holdings, LLC	Phone: 620-870-1660
2951 CR 2000, Independence, KS 67301	Oil / Gas Purchaser: Coffeyville Resources
	Date: 01-04-2016
Title: Manager	Signature: Suff All
Acknowledgment of Transfer: The above request for transfer of injection a	tuthorization, surface pit permit #N/A has been
noted, approved and duly recorded in the records of the Kansas Corporation C	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the al	bove 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: Lernit WAS	permitted by No.:
Cancelled 3-10-11	
Date:	Date:
Authorized Signature	Authorized Signature
DISTRICT EPR PI	RODUCTION $2.3.16$ uic $2-3-16$
Mail to: Past Operator New Operator	r District

Must Be Filed For All Wells

45318 KDOR Lease No.: * Lease Name: City of Coffeyville N/2 NE/4 of Section 8 Township 34, Range 17 East, Except lots 7 and 8 Location: Well No. API No. Footage from Section Line Type of Well Well Status (YR DRLD/PRE '67) (i.e. FSL = Feet from South Line) (Oil/Gas/INJ/WSW) (PROD/TA'D/Abandoned) Circle 4620 ESD/FNL 1 15-125-23516 🗸 660 Oil Inactive FELIFWL 2 15-125-24742 🗸 5060 Oil Inactive 660 FSL/FNL ÆEL)FWL 3 5060 (FSI)/FNL Oil 15-125-24743 ° 1100 Inactive FEL/FWL 4 15-125-24736 ✓ 4620 (FSL) FNL 1100 (FEL/FWL Oil Inactive 15-125-24744 4830 /FSJ/FNL 5 870 Inj⊁ Inactive 6 15-125-24783 660 Oil Inactive 4180 (FEL)/FWL 15-125-24784**√** 7 1100 Oil Inactive 15-125-24785 8 4390 (FSL/FNL Inj X 870 Inactive 15-125-25884 9 1540 (FEL/FWL Oil Inactive 10 15-125-25904 4620 Oil Inactive 1540 15-125-25969 13 4300 1316 lnj Inactive FEL/FWL FSL/FNL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL Permit was Cancelle! FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL Ma FEL/FWL OV FSL/FNL FSL/FNL FEL/FWL FEL/FWL FSL/FNL FSL/FNL FEL/FWL

^{*} 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.

Form KSONA-1 July 2014 Form Must Be Typed Form must be Signed All blanks must be Filled

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CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

OPERATOR: License # 35217	Well Location:
Name: MB Holdings, LLC	
Address 1: 2951 CR 2000	County: Montgomery
Address 2:	City of Coffornillo
City: Independence State: KS Zip: 67301 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: Bryan Allen	the lease below:
Phone: (620) 870-1660 Fax: ()	Section 8, Township 34, Range 17 East, Except lots 7
Email Address:	and 8, Airport Industrial Park City of Coffeyville, KS 67.3 Acres MOL
Surface Owner Information:	
Name: City of Coffeyville	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: P.O. Box 1629	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: Coffeyville State: ks Zip: 67337 +	-
are preliminary non-binding estimates. The locations may be entered Select one of the following:	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 be	Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this , 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 owner(s). To mitigate the additional cost of the KCC performing this so of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form C	ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.
form and the associated Form C-1, Form CB-1, Form T-1, or Form C I hereby certify that the statements made herein are true and correct	P-1 will be returned. to the best of my knowledge and belief.
form and the associated Form C-1, Form CB-1, Form T-1, or Form C I hereby certify that the statements made herein are true and correct	P-1 will be returned. to the best of my knowledge and belief.
form and the associated Form C-1, Form CB-1, Form T-1, or Form C	to the best of my knowledge and belief.

KCC WICHITA JAN 08 2016 RECEIVED

1. That lessor, for and in consideration of the sum of One Dollar (\$1.00) in hand paid and of the covenants and agreements hereinafter contained to be performed by the lessee, has this day granted, leased, and let, and by these presents does hereby grant, lease, and let exclusively unto the lessee the hereinafter described land, for the purpose of carrying on geological, geophysical, and other exploratory work, including core drilling, and the drilling, mining, and operating for, producing, and saving all of the oil, gas, casinghead gas, casinghead gasoline, including all associated hydrocarbons produced in a liquid or gaseous form and including gas found in and produced from coal formations or coal seams and all zones in communication therewith, which gas is sometimes referred to as coal bed methane, coal seam gas or occluded gas and all other gases and their respective constituent vapors, (including coalbed methane gas, helium, and all other constituents and substances produced therewith), including the dewatering for production of coalbed methane gas, and for constructing roads, laying pipe lines, building tanks, storing oil, and erecting other structures thereon which are necessary or convenient for the economical operation of said land to produce, save, take care of, and manufacture all of such substances, said tract of land with any reversionary rights therein being situated in the county of Montgomery, state of Kansas, and described as follows:

The North Half of the Northeast Quarter (N/2 NE/4) of Section 8, Township 34 South, Range 17 East, Except Lots 7 and 8, Airport Industrial Park Addition No. 1 to the City of Coffeyville, Kansas,

containing 67.3 acres, more or less.

- 2. This lease shall remain in force for a term of eighteen (18) months from the date hereof, and as long thereafter as oil, gas, casinghead gas, casinghead gasoline, or any of the products covered by this lease are or can be produced.
- 3. The lessee shall deliver to lessor as royalty, free of cost, on the lease, or into the pipe line to which lessee may connect its wells, the equal three-sixteenths (3/16ths) part of all oil produced and saved from the leased premises, or at the lessee's option may pay to the lessor for such three-sixteenths (3/16ths) royalty the market price for oil of like grade and gravity prevailing on the day such oil is run into the pipe line or into storage tanks.
- 4. The lessee shall pay to lessor for gas produced from any oil well and used by the lessee for the manufacture of gasoline or any other product as royalty three-sixteenths (3/16ths) of the market value of such gas at the mouth of the well. The lessee shall pay to lessor for gas of whatsoever nature or kind (with all of its constituents) and all other substances covered hereby sold by lessee, a royalty of three-sixteenths (3/16ths) of the net proceeds realized by lessee from the sale thereof, less a proportionate part of the ad valorem, production, severance and other excise taxes and any costs incurred by lessee in delivering, processing, compressing, transporting, dehydrating, or otherwise making gas or other substances merchantable with said payments to be made monthly, not more than sixty (60) days following the last day of the month in which gas is delivered into the pipeline and credited to lessee's

State of Kansas, Montgomery County This instrument was filed for Record on October 05, 2015 09:26:00 AM Recorded in Book 642 Page 1345-1348

Fee: \$36.00 201503441

Marilyn Calhoun, Register of Deeds

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account by the gas purchaser.

- 5. If Lessee shall commence to drill a well or commence reworking operations on an existing well within the term of this lease or any extension thereof, the Lessee shall have the right to drill such well to completion or complete reworking operations with reasonable diligence and dispatch, and if oil or gas, or either of them, be found in paying quantities, this lease shall continue and be in force with like effect as if such well had been completed within the term of years first mentioned. Drilling operations or mining operations shall be deemed to be commenced when the first material is placed on the leased premises or when the first work, other than surveying or staking the location, is done thereon which is necessary for such operations.
- 6. The lessee shall have the right to use gas, oil, and water found on said land for its operations thereon, except water from the wells or ponds of the lessor. The lessee shall bury its pipe lines below plow depth and shall pay for damage caused by its operations to growing crops on said land. No well shall be drilled nearer than 200 feet to any existing commercial building now on said premises, nor within 200 feet of Perl Schmid Drive without the prior written consent of the lessor. Lessee shall have the right at any time during, and within six (6) months after the termination or expiration of this lease, to remove all machinery, fixtures, houses, buildings, and other structures placed on said premises, including the right to draw and remove all casing. Lessee shall grade to the original level and restore the surface to its original condition, as nearly as practicable, within six (6) months after the termination or expiration of this lease. All abandoned wells shall be plugged in accordance with state statutes and the rules and regulations of the Kansas Corporation.
- 7. Inasmuch as the leased premises are adjacent to Lessor's municipal airport, the Lessee shall comply with all Federal Aviation Administration regulations applicable to the leased premises; e.g., maximum height restrictions for equipment, spacing of equipment, etc.; and to all applicable zoning regulations.
- 8. On any well drilled by Lessee and completed as a dry hole, Lessee shall plug said well and shall restore the surface as nearly as practicable to its original condition, or better.
- 9. Lessee shall maintain its equipment and all access roads in good condition and repair. The location of all access roads shall be subject to the approval of the Coffeyville City Manager or his designee.
- 10. Lessee agrees to notify the City's farm tenant when Lessee intends to undertake any work on the leasehold premises, other than routine day-to-day pumping. Lessor will furnish Lessee with the contact information for its farm tenant.
- 11. Lessee acknowledges the existence of an underground natural gas storage area under or near the leased premises. Lessee agrees to comply with K.A.R. 82-3-311, and to take proper precautions so as not to cause the Lessor or Lessee to be in violation of the terms and conditions of Lessor's existing natural gas storage agreement, and shall indemnify and hold Lessor harmless from any claims, counts, actions, causes of action, damages, obligations, and/or suits, related to the underground natural gas storage area, and which are in any way related to or associated with Lessee's activities under the terms of this Lease.

KCC WICHITA

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- 12. Lessee agrees to clean up and remove any existing, abandoned oil and gas lease equipment upon the premises, and to backfill the existing surface pits thereon, within six (6) months of the date hereof.
- 13. In case said lessor owns a less interest in the above-described land, other than the entire and undivided fee simple estate therein, then the royalties and rentals herein provided shall be paid to said lessor only in the proportion which his interest bears to the whole and undivided fee. However, such rental shall be increased at the next succeeding rental anniversary after any reversion occurs to cover the interest so acquired.
- 14. If the estate of either party hereof is assigned (and the privilege of assigning in whole or in part is expressly allowed), the covenants hereof shall extend to the heirs, devisees, executors, administrators, successors, and assigns, but no change of ownership in the land or in the rentals or royalties or any sum due under this lease shall be binding on the lessee until it has been furnished with either the original recorded instrument of conveyance or a duly certified copy thereof or a certified copy of the will of any deceased owner and of the probate thereof, or certified copy of the proceedings showing appointment of an administrator for the estate of any deceased owner, whichever is appropriate, together with all original recorded instruments of conveyance or duly certified copies thereof necessary in showing a complete chain of title back to lessor to the full interest claimed, and all advance payments of rentals made hereunder before receipt of said documents shall be binding on any direct or indirect assignee, grantee, devisee, administrator, executor, or heir of lessor.
- 15. If the leased premises are now or shall hereafter be owned in severalty or in separate tracts, the premises nevertheless shall be developed and operated as one lease, and all royalties accruing hereunder shall be treated as an entirety and shall be divided among and paid to such separate owners in the proportion that the acreage owned by each separate owner bears to the entire leased acreage.
- 16. Lessor hereby warrants and agrees to defend the title to the land herein-described and agrees that the lessee, at its option, may pay and discharge in whole or in part any taxes, mortgages, or other liens existing, levied, or assessed on or against the above-described lands and, in the event it exercises such option, it shall be subrogated to the rights of any holder or holders thereof and may reimburse itself by applying to the discharge of any such mortgage, tax, or other lien, any royalty or rentals accruing hereunder.
- 17. If, after the expiration of the primary term of this lease, production on the leased premises shall cease from any cause, this lease shall not terminate, provided lessee (a) resumes production, (b) initiates operations for recompleting an existing well within sixty (60) days from such cessation or (c) initiates operations for drilling a new well within sixty (60) days from such cessation, and this lease shall remain in force during the diligent prosecution of such operations and, if production results therefrom, then as long as production continues.
- 18. Lessee may at any time surrender or cancel this lease in whole or in part by delivering or mailing such release to the lessor, or by placing same of record in the proper county. In case said lease is surrendered and canceled as to only a portion of the acreage covered thereby, then all payments and liabilities thereafter accruing under the terms of said lease as to the portion canceled, shall cease and determine and any rentals thereafter paid may be apportioned on an acreage basis, but as to the portion of the acreage not released the terms and provisions of this lease shall continue and remain in full force

and effect for all purposes.

My Appointment Expires:

\\Melodi-pc\mel\O&G\mbcoffogl.doc.wpd

- 19. All provisions hereof, express or implied, shall be subject to all federal and state laws and the orders, rules, or regulations (and interpretations thereof) of all governmental agencies administering the same, and this lease, shall not be in any way terminated wholly or partially, nor shall the lessee be liable in damages for failure to comply with, any of the express or implied provisions hereof if such failure accords with any such laws, orders, rules, or regulations (or interpretations thereof). If, during the last six months of the primary term hereof, lessee should be prevented from drilling a well hereunder by the order of any constituted authority having jurisdiction there over, the primary term of this lease shall continue until six months after said order is suspended.
- 20. Lessee may not assign any interest in this lease without the prior written consent of Lessor, which consent will not be unreasonably withheld.
- 21. This lease and all its terms, conditions, and stipulations shall extend to and be binding on all successors of said lessor and lessee.

IN WITNESS WHEREOF, the undersigned signs the day and year first above written.

City of Coffeyville, Kansas

	Christopher	Vi Williams, Mayo	or, Lessor
Attest:			
Cinty	<u>ue</u>	COFFE COFFE	JAN 08 2016
Cindy Price	, City Clerk	SEAL SEAL	RECEIVED
STATE OF KANSAS)	THE COUNTY OF THE PARTY OF THE	
COUNTY OF MONTGO	MERY)		
The foregoing in 2015, by	strument was ackno	owledged before me this <u>22</u> XLL: as Mayor of the City	day of fest of Coffeyville,
Kansas.		Circle of	(). Ne

A CINDY PRICE

Notary Public - State of Kansas

My Appt. Expires Q/ 26 (7)

NOTARY PUBLIC

111915_Niorara_GG_System.pdf Form T-1

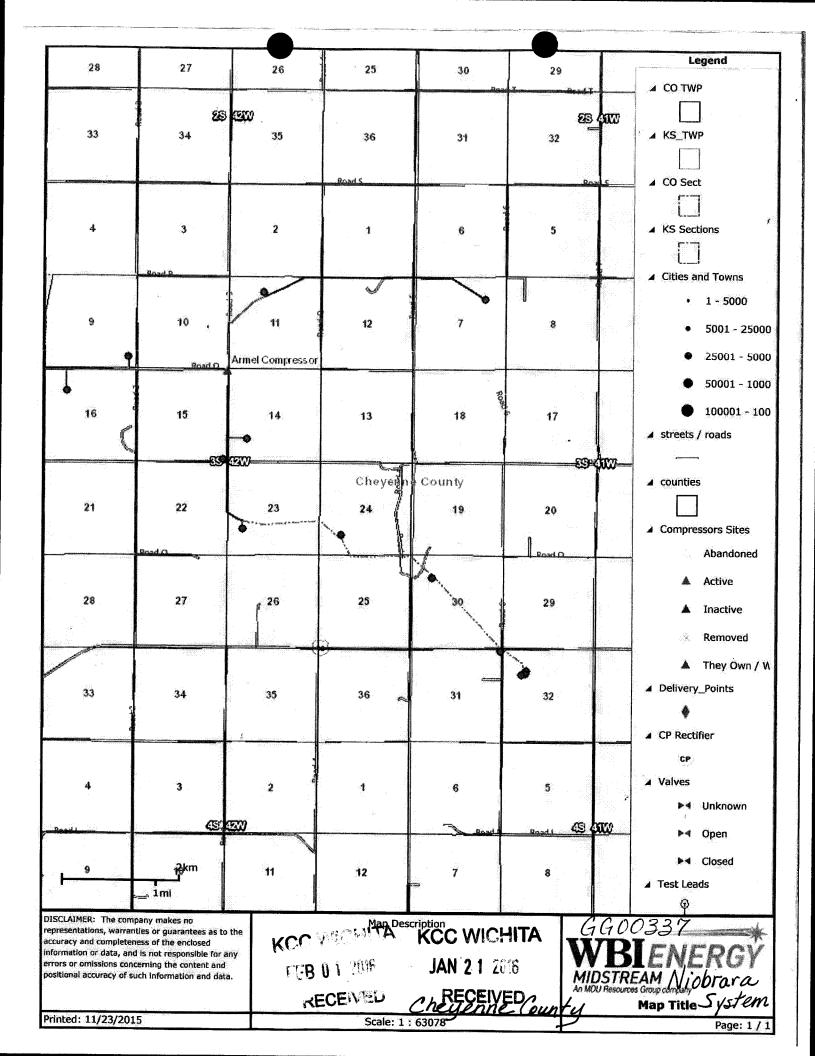
KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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,

Check Applicable Boxes:	MUST be submitted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:November 19, 2015
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.:
Gas Gathering System: Niobrara	
Saltwater Disposal Well - Permit No.:	Lease Name: Niobrara Gas Gathering System
Spot Location: feet from N /	S Line NE4 Sec. 7 Twp. 38 R. 41W EV W
feet from E /	W Line Legal Description of Lease:
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Cheyenne
Number of Injection Wells**	Production Zone(s):
Field Name:	
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul)	, Secretary - Secretary
Type of Pit: Emergency Burn Sei	feet from E / W Line of Section
	Workover Drilling
Past Operator's License No.	
Past Operator's Name & Address: WBI Energy Midstream	n, LLC Phone: 701-530-1585
1250 West Century Avenue, Bismarck, ND 5850	Date: November 23, 2015
Title: Customer Service Manager	NOACH ASSOCIATION KCC WIGHT
Approval to process-lega	Signature: ///// Signature: ////////////////////////////////////
New Operator's License No. 33725	JANA 2 1 ZUIS
	Contact Person: Joel Sauer RECEIVED
New Operator's Name & Address: Foundation Energy Fund V-B H	Holding, LLC Phone: 303-861-0504
and Foundation Energy Fund	Oil / Gas Purchaser:
1801 Broadway, Suite 408, Denver, CO 80201	Date: 12-9-2015
Title: Vice President	Date: 12-9-2015 Signature: April 18-
	J
Acknowledgment of Transfer: The above request for transf	fer of injection authorization, surface pit permit # has been
	as 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 ackno	owledged as is acknowledged as
the new operator and may continue to inject fluids as au	is achilowiedged as
Permit No.: Recommended action:	The same of the sa
. Recommended action:	permitted by No.:
Date:	Dete
Authorized Signature	Date:
DISTRICT EPR _2-2-	
Mail to: Past Operator	New Operator District



Kansas Corporation Commission Oil & Gas Conservation Division

Form T-1 March 2010 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.

✓ Oil Lease: No. of Oil Wells	Effective Date of Transfer: 1/1/2016
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.:114175_124014
Gas Gathering System:	
Saltwater Disposal Well - Permit No.:	Lease Name:Beckmeyer / McConnel
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease: SE/4 of the Sec.32 Twp.15 R.21E
✓ Enhanced Recovery Project Permit No.: E-30,088	
Entire Project: 🗸 Yes 🗌 No	County: Franklin
Number of Injection Wells	
Field Name: Paola-Rantoul	Condend
** Side Two Must Be Completed.	Injection Zone(s): Squirrel
Olde (Wo Must De Completeu.)	
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
24000	
Past Operator's License No. 34028	Contact Person: Lance Town
Past Operator's Name & Address:Triple T Oil, LLC	Phone: 913-710-5400
PO Box 716 Louisburg, KS 66053	Date: /-25-/6
Title: Operator	Signature:
	Olgitature.
New Operator's License No. 32218	Contact Person: Lance Town KCC WICHITA
New Operator's Name & Address: TDR Construction, Inc.	012 710 5400
PO Box 339	FEB U 3 tulk
	Oil / Gas Purchaser:
Louisburg, KS 66053	Date: /-25-16 RECEIVED Signature:
Title: Operator	Signature:
Acknowledgment of Transfer: The above request for transfer of injection a	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 a	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 F	PRODUCTION UIC
Mail to: Past Operator New Operato	or District

Must Be Filed For All Wells

KDOR Lease	No.: 114175 124014				
* Lease Name:	Beckmeyer / McConn	el	* Location:	SE/4 of the Sec.32	2 Twp.15 R.21E
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
35	15-059-27078-00-00	1470 FSL/FNL	2125 FELFWL	Oil	PROD
14	15-059-25167-00-00	1036 FSI/FNL	2500 FEVFWL	Oil	PROD
15	15-059-25168-00-00	667 FSIVENL	2489 ENFWL	Oil	PROD
3	<u>15-059-01091-00-00</u>	550 FSUFNL	750 FEIVEWL	Oil	PROD
10	15-059-23247-00-00	2142 EST/FNL	2469 (E)/FWL	Oil	PROD
11	15-059-23588-00-00	1742 ESLIFIL	2144 (EI)/FWL	Oil	PROD
12	15-059-23947-00-00	2119 EST/FNL	2130 FELFWL	Oil	PROD
<u>13</u>	15-059-25605-00-00	2441 RSI/FNL	2095 FELFWL	Oil	PROD
16	15-059-25191-00-00	820 ESLIFIL	2240 FELFWL	Oil	PROD
<u>17</u>	15-059-25192-00-00	1151 ESLIFNL	1743 FEUFWL	Oil	PROD
18	15-059-25398-00-00	1325 ESTIFNL	2490 FEIL/FWL	Oil	PROD
19	15-059-25606-00-00	1142 ASUFNL	2287 EL/FWL	Oil	PROD
20	15-059-25607-00-00	2475 ESTENL	1773 (EL)/FWL	Oil	PROD
21	15-059-25608-00-00	2140 ES /FNL	1796 (EL)FWL	Oil	PROD
22	15-059-25609-00-00	1800 ESLYFNL	1795 (EL/FWL	Oil	PROD
23	15-059-25610-00-00	1475 FSLYFNL	1785 (E)/FWL	Oil	PROD
24	15-059-26065-00-00	2470 SLYFNL	1480 FBL/FWL	Oil	PROD
25	15-059-26066-00-00	2140 ESLIFINE	1480 FELFWL	Oil	PROD
26	15-059-26067-00-00	1800 FS /FNL	1480 (FEL/FWL	Oil	PROD
27	15-059-25614-00-00	1477 FSL/FNL	1470 FEIVFWL	Oil	PROD
28	15-059-26116-00-00	2480 ESTIFNL	1130 FELIFWL	Oil	PROD
29	15-059-26115-00-00	2140 SUFNL	1130 EL/FWL	Oil	PROD
30	15-059-26117-00-00	1800 ESLIFNL	1130 FELFWL	Oil	PROD
31	15-059-26118-00-00	1460 STENL	1130 ELYFWL	Oil	PROD

^{*} 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.

Must Be Filed For All Wells

KDOR Lease No.: 114175 124014

Lease Name: _	Beckmeyer / McCo	onnel	* Location:S	E/4 of the Sec.32 Twp.	15 R.21E	
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)	
32	15-059-26209-00-00	2480 FSI/FNL	800 FELFWL	Oil	PROD	
33	15-059-26358-00-00	2140 FSI)/FNL	825 FELFWL	Oil	PROD	
34	15-059-26359-00-00	1810 (FSI)/FNL	825 FELYFWL	Oil	PROD	
5	15-059-19281-00-00	1410 ESI/FNL	2544 FEI/FWL	Oil	INACTIVE	
59-H	15-059-26631-0100	825 (SL)FNL	1155 FEI/FWL	Oil	PROD	
6	15-059-21979-00-00	2519 (FS)/FNL	2466 FELYFWL	Oil	PROD	
8	15-059-19282-00-00	1009 (FSI) FNL	2025 FELFWL	Oil	PROD	
9	15-059-22703-00-00	1768 (SI)/FNL	2471 FELVFWL	Oil	PROD	
I-1	15-059-25929-00-00		2310 ELYFWL	lnj	Active	
I-10	15-059-25624-00-00	1968 (SL)FNL	1617 (FE) /FWL	lnj	Active	
I-11	15-059-25625-00-00	1650 FSIVFNL	1620 FELFWL	Inj	Active	
l-12	15-059-25626-00-00	1337 (FS)/FNL	1625 FEIVFWL	Inj	Active KCC W	ICHI
I-13	15-059-26130-00-00	2293 (SI)FNL	1295 (EL)FWL	<u>Inj</u>	Active FEB 0	3 2016
I-14	15-059-26131-00-00	1968 (SL)FNL	1287 (EL)FWL	Inj	Active REC	EIVE
I-15	15-059-26132-00-00	1650 ESLYFNL	1290 FEIVFWL	Inj	Active	
I-16	15-059-26133-00-00	1329 (FSL)FNL	1289 FEL/FWL	Inj	Active	
I-17	15-059-26360-00-00	2285 FSLYFNL	975 ELIVEWL	Inj	Active	
I-18	15-059-26361-00-00	1955 EST/FNL	975 (FE)/FWL	_Inj	Active	
<u>l-19</u>	15-059-26362-00-00	1625 EST/FNL	975 (FE)/FWL	Inj	Active	
I-2	15-059-25616-00-00	1530 (FS)/FNL	2331 FEI/FWL	Inj	Active	
I-5	15-059-25619-00-00	2299 FSIVFNL	1973 FEIVFWL	Inj	Active	
I-6	15-059-25620-00-00	1987 (S) JFNL	1971 FELYFWL	<u>Inj</u>	Active	
I-7	15-059-25621-00-00	1642 (FS)/FNL	1949 FEIVFWL	Inj	Active	
I-8	15-059-25622-00-00	1280 (FSI)/FNL	1955 FEIVFWL	Inj	Active	
		\vee	\cup			

^{*} 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.

Must Be Filed For All Wells

KDOR Lease No.: 114175 124014

* Lease Name: _	Beckmeyer / McCor	nnel	* Location:	SE/4 of the Sec.32 Tw	p.15 R.21E
Well No.	API No. (YR DRLD/PRE '67)	Footage from S (i.e. FSL = Feet fro		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
<u> </u>	15-059-26068-00-00	1288 FSVFNL	1980 Gircle	<u>Inj</u>	Active
P-2	15-059-26549-00-00	1970 (FS)/FNL	2285 (ELYFWL	Inj	Active
51	15-059-26240-00-00	165 FSL/FNL	2475 FELIFWL	Oil	PROD
52	15-059-26241-00-00	165 (FSL/FNL	2145 FELYFWL	Oil	PROD
53	15-059-26242-00-00	165 FSJ/FNL	1815 EL/FWL	Oil	PROD
54	15-059-26243-00-00		1485 EL/FWL	Oil	PROD
55	15-059-26244-00-00	495 FSVFNL	2145 FE_/FWL	Oil	PROD
56	15-059-26245-00-00	495 FSVFNL	1815 FEL/FWL	Oil	PROD
57	15-059-26246-00-00	495 FSYFNL		Oil	PROD
58	15-059-26247-00-00	825 FSUFNL	1485 FEDFWL	Oil	PROD
60	15-059-26559-00-00	495 FSJJFNL	1155 (EL/FWL	Oil	PROD
61	15-059-26560-00-00	165 FSI/FNL	1155 FELFWL	Oil	PROD
I-50	15-059-26270-00-00	50 ESIVENL	2630 FEVFWL	Inj	Active
I-51	15-059-26236-00-00	330 ESTIFINE	2310 FED/FWL	Inj	Active
I-52	15-059-26237-00-00	330 FSLYFNL	1980 FEIVFWL	lnj	Active
I-53	15-059-26238-00-00	330 FSI/FNL	1650 (EI)/FWL	lnj	Active
I-54	15-059-26239-00-00	_660_FSI/FNL	1650 FELFWL	Inj	Active
<u>l-55</u>	15-059-26272-00-00	660 FS) FNL	1980 FWL	<u>Inj</u>	Active
I-56	15-059-26561-00-00	330 (FS)/FNL	1320 FEI) FWL	Inj	Active
l-57	15-059-26562-00-00	660 ESI/FNL	1320 FENFWL	Inj	Active
	· · · · · · · · · · · · · · · · · · ·	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		KCC WICHITA
		FSL/FNL	FEL/FWL		FEB 0.3 20th
		FSL/FNL	FEL/FWL		RECEIVED

^{*} 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.

Form KSONA-1 January 2014 Form Must Be Typed Form must be Signed All blanks must be Filled

RECEIVED

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

OPERATOR: License # 34028	Well Location: <u>SE</u> Sec. 32 Twp. 15 S. R. 21 X East West
Name.	Franklin
Address 1.	Rockmover ALL
Address 2:City:LouisburgState:KS _ Zip:66053 _+	Lease Name
City: State:KS _ Zip: Zip: Contact Person: Lance Town	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Phone: (913) 710-5400 Fax: ()	SE/4 of the Sec.32 Twp.15S R.21E
Email Address: NA	
Surface Owner Information:	
Name: Bonnie Smith	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1:173 E. 1250 Rd.	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: Baldwin City State: Ks Zip: 66006 +	
Select one of the following:	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 owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface clocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
Select one of the following: 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 form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface	Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form in being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this as of the surface owner by filling out the top section of this form and
Select one of the following: 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 form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addret that I am being charged a \$30.00 handling fee, payable to the	Act (House Bill 2032), I have provided the following to the surface clocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form to being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this so of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form.
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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:	1
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 1/4/2016
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 104156
Gas Gathering System:	Lease Name: Lindberg A (Lindberg A)
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	Sec. 15 Twp. 19S R. 2 E W
feet from E / W Line	Legal Description of Lease: Northeast Quarter (NE/4) of Section Fifteen (15),
Enhanced Recovery Project Permit No.:	Township Nineteen South (19S), Range Two West (2W)
Entire Project: Yes No	County: McPherson
Number of Injection Wells **	Production Zone(s): Mississippian System
Field Name: Ritz - Canton	
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
Past Operator's License No. 5731	Contact Person: Kendra Anderson
Past Operator's Name & Address: Kent Anderson	Phone: 620-245-7390
308 N. Main, Galva, KS 67443-8803	Date: 1-4-16
Title:	Signature: Kun Cul-
New Operator's License No. 35275	Contact Person: Kendra Anderson KCC WICH
New Operator's Name & Address: Kendra A. Anderson	Phone: 620-245-7390 FEB 0 3 201
509 N. Santa Fe St., Galva, KS 67443	CHC MaDhaman Daffaan Ing
	RECEIVE
	Date: 1-4-16
Title:	Signature: Colo
Acknowledgment of Transfer: The above request for transfer of injection a	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 a	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.:
. Neconinenced action.	pointing by No
Date:	Date:
Authorized Signature	Authorized Signature
DISTRICT EPR	PRODUCTION UIC
	or District

Must Be Filed For All Wells

	No.: 104156 Lindberg A (Lindberg A)		* Location:T	19S, R2W, Sec. 15	
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-113-20654	4850 Circle	2310 Circle	Oil	Prod
2	15-113-20837	4259 FSL FNL	549 (FE)/FWL	Oil	Prod
Market State of the State of th		FSL/FNL	FEL/FWL		
***************************************		FSL/FNL	FEL/FWL	<u></u>	
	- AMAZAANINA	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/F W L		
		FSL/FNL	FEL/FWL		· · · · · · · · · · · · · · · · · · ·
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/F W L		
		FSL/FNL	FEL/F W L		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
			FEL/FWL		KCC WICHITA
					FEB 03 2016 RECEIVED

A separate sheet may be attached if necessary

^{*} 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.

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

OPERATOR: License # 35275	Well Location:
Name: Kendra A. Anderson	S2 NW_NW_NE Sec. 15 Twp. 19 S. R. 2 East West
Address 1: 509 N. Santa Fe St.	County: McPherson
Address 2:	Lease Name: Lindberg A (Lindberg A) Well #: 1
City: Galva State: KS Zip: 67443 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: Kendra Anderson	the lease below:
Phone: (620) 245-7390 Fax: ()	Northeast Quarter (NE/4) of Section Fixeen (15),
Email Address: anderken@yahoo.com	Township Nineteen South (19S), Range Two West (2W).
Surface Owner Information:	
Name: Eric & Michael Norstrom Address 1: 2163 Mohawk Rd	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: 2163 Mohawk Rd	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: Galva State: KS Zip: 67443 +	
the KCC with a plat showing the predicted locations of lease roads,	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat
the KCC with a plat showing the predicted locations of lease roads,	athodic Protection Borehole Intent), you must supply the surface owners and
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered. Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat and on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. See Act (House Bill 2032), I have provided the following to the surface pe located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this
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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

OPERATOR: License # 35275	Well Location:			
Name: Kendra A. Anderson	SE_NE_NE_Sec. 15 Twp. 19 S. R. 2 East X West			
Address 1: 509 N. Santa Fe St.	County: McPherson			
Address 2:	Lease Name: Lindberg A (Lindberg A) Well #: 2			
City: Galva State: KS Zip: 67443 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of			
Contact Person: Kendra Anderson	the lease below:			
Phone: (620) 245-7390 Fax: ()	Northeast Quarter (NE/4) of Section Fifteen (15),			
Email Address: anderken@yahoo.com	Township Nineteen South (19S), Range Two West (2W).			
Surface Owner Information:				
Name: Charles L & Wilma J Lindberg Trust	When filing a Form T-1 involving multiple surface owners, attach an additional			
Name: Charles L & Wilma J Lindberg Trust Address 1: 1716 Saint Mayeul Dr. Address 2:	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			
City: Modesto State: CA Zip: 95356 +	_			
the KCC with a plat showing the predicted locations of lease roads,	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plate Form CB-1 plate or a separate plat may be submitted.			
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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:	ued wun uns jorm.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 1/4/2016
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.:
Gas Gathering System:	Lease Name: Lindberg (Lindberg)
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	Sec. 15 Twp. 19S R. 2 E W
feet from E / W Line	Legal Description of Lease: Northeast Quarter (NE/4) of Section Fifteen (15),
Enhanced Recovery Project Permit No.:	Township Nineteen South (19S), Range Two West (2W).
Entire Project: Yes No	County: McPherson
Number of Injection Wells **	Production Zone(s): Mississippian System
Field Name: Ritz - Canton	
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul)	
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
J. C. S. J. J. L.	
Past Operator's License No. 5731	Contact Person: Kendra Anderson
Past Operator's Name & Address: Kent Anderson	Phone: 620-245-7390
308 N. Main, Galva, KS 67443-8803	Date: 1-4-16
Title:	Signature: KCC WICHITA
	FEB 0.3 2016
New Operator's License No. 35275	Kendra Anderson
New Operator's Name & Address: Kendra A. Anderson	Phone: 620-245-7390
509 N. Santa Fe St., Galva, KS 67443	Oil / Gas Purchaser: CHS McPherson Refinery Inc.
	Date: 1-4-16
Title:	Signature: 76 C
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been
	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the	·
	T
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	PRODUCTION UIC
Mail to: Past Operator New Operato	

Must Be Filed For All Wells

KDOR Lease					
* Lease Name: Lindberg (Lindberg)		* Location:	* Location: T19S, R2W, Sec. 15		
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)
1	15-113-19227	1240 FSL FNI	1300 Circle	Oil	Prod
2	15-113-01163	2985 (FSL) FNL	1280 FELFWL	Oil	Prod
		FSL/FNL	FEL/FWL		
ARREST - WAS Florida by		FSL/FNL	FEL/FWL		
-		FSL/FNL	FEL/FWL	<u></u>	-
	***************************************	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		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		KCC WICHITA
		FSL/FNL	FEL/FWL		- - FFR 0 3 2016 -
					RECEIVED
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	W4. 4.1	FSL/FNL	FEL/FWL	****	
***************************************		FSL/FNL	FEL/F W L	***	
		FSL/FNL	FEL/FWL		

^{*} 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.

Form KSONA-1
July 2014
Form Must Be Typed
Form must be Signed
All blanks must be Filled

RECE

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

OPERATOR: License # 35275	Well Location:
Name: Kendra A. Anderson	SW_SW_NE_NE_Sec. 15 Twp. 19 S. R. 2 East X West
Name: Kendra A. Anderson Address 1: 509 N. Santa Fe St.	County: McPherson
Address 2:	County: McPherson Lease Name: Lindberg (Lindberg) Well #: 1
City, Galva State, KS Zin. 67443	Maria E Tara Maria
Contact Person: Kendra Anderson	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Phone: (620) 245-7390 Fax: ()	Northeast Quarter (NE/4) of Section Fifteen (15),
Contact Person: Kendra Anderson Phone: (620) 245-7390 Fax: () Email Address: anderken@yahoo.com	Township Nineteen South (19S), Range Two West (2W).
Surface Owner Information:	
Name: Charles L & Wilma J Lindberg Trust	When filing a Form T-1 involving multiple surface owners, attach an additional
Name: Charles L & Wilma J Lindberg Trust Address 1: 1716 Saint Mayeul Dr.	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:	
	athodic Protection Borehole Intent), you must supply the surface owners and
the KCC with a plat showing the predicted locations of lease roads,	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be enter Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notion owner(s) of the land upon which the subject well is or will	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. 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
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be enter Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notion owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, form I have not provided this information to the surface owner(s) KCC will be required to send this information to the surface.	tank batteries, pipelines, and electrical lines. The locations shown on the plat red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. 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 filled is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address. I acknowledge that, because I have not provided this information, the se owner(s). To mitigate the additional cost of the KCC performing this lives of the surface owner by filling out the top section of this form and
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be enter Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notiowner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, form; and 3) my operator name, address, phone number, form; and 1 have not provided this information to the surface owner(s) KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and add that I am being charged a \$30.00 handling fee, payable to	tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. 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 ax, and email address. I acknowledge that, because I have not provided this information, the se owner(s). To mitigate the additional cost of the KCC performing this liress of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be enter Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notion owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, form; and 3) my operator name, address, phone number, form; and 3) my operator name, address, phone number, form and 3 information to the surface owner(s) KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and add that I am being charged a \$30.00 handling fee, payable to the choosing the second option, submit payment of the \$30.00 handling fee.	tank batteries, pipelines, and electrical lines. The locations shown on the plat red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. The 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 ax, and email address. The country is a formation of the formation of the formation of the formation of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form. The fee is not received with this form, the KSONA-1 CP-1 will be returned.
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be enter Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notiowner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, form; and 3) my operator name, address, phone number, form; and in the provided this information to the surface task, I acknowledge that I must provide the name and addithat I am being charged a \$30.00 handling fee, payable to the 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	tank batteries, pipelines, and electrical lines. The locations shown on the plat red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. The 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 ax, and email address. The country is a formation of the formation of

Form KSONA-1
July 2014
Form Must Be Typed
Form must be Signed
All blanks must be Filled

RECEIVE

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

Select the corresponding form being filed:	(Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License # 35275	Waller			
Name: Kendra A. Anderson	Well Location: <u>S2 _S2 _NE Sec. 15 _Twp. 19 _S. R. 2</u> East West			
Address 1: 509 N. Santa Fe St.	County: McPherson			
Address 2:	Lease Name: Lindberg (Lindberg) Well #: 2			
City: Galva State: KS Zip: 67443 +				
Contact Person: Kendra Anderson	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Contact Person: Kendra Anderson Phone: (620) 245-7390 Fax: ()	Northeast Quarter (NE/4) of Section Fifteen (15),			
Email Address: anderken@yahoo.com	Township Nineteen South (19S), Range Two West (2W).			
Surface Owner Information: Name: Charles L & Wilma J Lindberg Trust Address 1: 1716 Saint Mayeul Dr. Address 2:	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.			
the KCC with a plat showing the predicted locations of lease roads, tar	odic Protection Borehole Intent), you must supply the surface owners and nk batteries, pipelines, and electrical lines. The locations shown on the plat 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 be	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.			
KCC will be required to send this information to the surface o	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this s of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form.			
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP	g fee with this form. If the fee is not received with this form, the KSONA-1 -1 will be returned.			
I hereby certify that the statements made herein are true and correct to	KCC WICH!			
Date: 1-4-16 Signature of Operator or Agent: 2				
	1 (1) 0 3 20			

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:	I
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 104153
Gas Gathering System:	Lease Name: Hill (Hill)
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	Legal Description of Lease: South half of the Northeast Quarter (S/2 NE/4) of
feet from E / W Line	
Enhanced Recovery Project Permit No.:	Section Ten (10), Township Nineteen (19) South, Range Two (2) West.
Entire Project: Yes No	County: McPherson
Number of Injection Wells **	Production Zone(s): Mississippian System
Field Name: Ritz - Canton	
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
Past Operator's License No. 5731	Contact Person: Kendra Anderson
Past Operator's Name & Address: Kent Anderson	Phone: 620-245-7390
308 N. Main, Galva, KS 67443-8803	Date: 1-4-16
Title:	Signature: KCC WICHIT
	FEB 8 3 2016
New Operator's License No. 35275	Contact Person: Kendra Anderson
New Operator's Name & Address: Kendra A. Anderson	Phone: 620-245-7390
509 N. Santa Fe St., Galva, KS 67443	Oil / Gas Purchaser: CHS McPherson Refinery Inc.
	Date: 1-4-16
Title:	Signature: 1 Color
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	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
1	PRODUCTION UIC
Mail to: Past Operator New Operat	tor District

Must Be Filed For All Wells

* Lease Name: Hill (Hill) * Location: S2 NE Sec. 10, T19S, R2W					
Well No. API No. (YR DRLD/PRE '67)			Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)
1	15-113-01155	3310 Circle	1400 Circle	Oil	Prod
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
ARE TO COLUMN TO THE TOTAL OF T		FSL/FNL	FEL/FWL	TOTAL STATE OF THE	
***************************************		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	****	FSL/FNL	FEL/F W L		
		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			KCC WICHITA
					FER 0.3 2016
			FEL/FWL		"NEVELVEE

		FSL/FNL	FEL/FWL		

^{*} 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.

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

25275	
OPERATOR: License # 35275	
Name: Kendra A. Anderson Address 1: 509 N. Santa Fe St.	
Address 1: 509 N. Santa Fe St.	County: McPherson
Address 2:	Lease Name: Hill (Hill) Well #: 1
City: Galva State: KS Zip: 67443 +	3 ·· · · · · · · · · · · · · · · · · ·
Contact Person: Kendra Anderson	the lease below:
Phone: (620) 245-7390 Fax: ()	
Email Address: anderken@yahoo.com	
Surface Owner Information:	
Name: Kuttler Family Trust, MD Jr & Betty Kuttler	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: 54-948 Riviera St.	sheet listing all of the information to the left for each surface owner. Surface
Address 2:	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.
City: LaQuinta State: CA Zip: 92253 +	
the KCC with a plat showing the predicted locations of lease roads, ta	nodic Protection Borehole Intent), you must supply the surface owners and the batteries, pipelines, and electrical lines. The locations shown on the plat
the KCC with a plat showing the predicted locations of lease roads, ta	nodic Protection Borehole Intent), you must supply the surface owners and ink batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
the KCC with a plat showing the predicted locations of lease roads, ta are preliminary non-binding estimates. The locations may be entered Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface plocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form CB-1, Form T-1, or Form to being filed is a Form C-1 or Form CB-1, the plat(s) required by this
 the KCC with a plat showing the predicted locations of lease roads, ta are preliminary non-binding estimates. The locations may be entered Select one of the following: 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 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 	Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form in being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ses of the surface owner by filling out the top section of this form and
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Kansas Corporation Commission Oil & Gas Conservation Division

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:	ilea with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 1/4/2016
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 104161
Gas Gathering System:	Lease Name: Ostlund (Ostlund)
Saltwater Disposal Well - Permit No.: E-22468.1	
Spot Location: 1711 feet from N / ✓ S Line	·
1308 feet from 🗸 E / 🗌 W Line	Legal Description of Lease: North half of the Southeast Quarter (N/2 SE/4) of
Enhanced Recovery Project Permit No.:	Section Ten (10), Township Nineteen South (19S), Range Two West (2W)
Entire Project: Yes No	County: McPherson
Number of Injection Wells**	Production Zone(s): Mississippian System
Field Name: Ritz - Canton	
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	feet from N/S Line of Section
(API No. if Drill Pit, WO or Haul)	feet from F / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
Past Operator's License No. 5731	Contact Person: Kendra Anderson
Past Operator's Name & Address: Kent Anderson	Phone: 620-245-7390
308 N. Main, Galva, KS 67443-8803	Date: 1-4-16
Title:	Signature: The cal KCC WICHIT
New Operator's License No. 35275	Contact Person: Kendra Anderson FEB 0 3 2015
New Operator's Name & Address: Kendra A. Anderson	Phone: 620-245-7390 RECEIVED
509 N. Santa Fe St., Galva, KS 67443	Oil / Gas Purchaser: CHS McPherson Refinery Inc.
	Date: 1-4-16
Title:	Signature: Colombia
Acknowledgment of Transfer: The above request for transfer of injection	n 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	e 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	PRODUCTION UIC
Mail to: Past Operator New Opera	ator District

Must Be Filed For All Wells

KDOR Lease	_{No.:} 104161	The second secon	apara y aj ung- a punamana.		
* Lease Name:	Ostlund (Ostlund)		* Location:	NE NW SE Sec. 10, T	19S, R2W
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)
2	15-113-20677	2120 FSI FNL	1791 Circle	Oil	Prod
3	15-113-21088	1711 FSIVENL	1308 (FEI)/FWL	SWD	
		FSL/FNL	FEL/F W L		
	-	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	waxaan ahaa ahaa ahaa ahaa ahaa ahaa ahaa	
		FSL/FNL	FEL/FWL		a and a second
	· <u></u>	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		- KCC WICHITA
emonths over		FSL/FNL	FEL/FWL		RECEIVED
		FSL/FNL	FEL/FWL		-

^{*} 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.

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

OPERATOR: License # 35275	Mali Lagging		
Name: Kendra A. Anderson	Well Location:NE_NW_SE_Sec. 10 Twp. 19 S. R. 2 East X West		
Name: Kendra A. Anderson Address 1: 509 N. Santa Fe St.	County: McPherson		
Address 2:	Lease Name: Ostlund (Ostlund) Well #: 2		
City: Galva State: KS 7in: 67443	16 filling a Fayor T d for any thinks well an a long a subject to be and described.		
Contact Person: Kendra Anderson	the lease below: North half of the Southeast Quarter (N/2 SE/4) of		
Phone: (620) 245-7390 Fax: ()			
Contact Person: Kendra Anderson Phone: (620) 245-7390 Fax: () Email Address: anderken@yahoo.com	Section Ten (10), Township Nineteen South (19S), Range Two West (2W).		
Surface Owner Information:			
Name: Ostlund Natural Resources Address 1: P.O. Box 473	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: P.O. Box 473	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: VIII. Hope State: KS Zip: 67108 +			
the KCC with a plat showing the predicted locations of lease roads,	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat		
the KCC with a plat showing the predicted locations of lease roads,	athodic Protection Borehole Intent), you must supply the surface owners and		
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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

RECEIVED

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

OPERATOR: License # 35275	Mall I mading			
Name: Kendra A. Anderson	Well Location: W2 SW NE SE a 10 - 19			
Address 1: 509 N. Santa Fe St.	W2_SW_NE_SE_Sec. 10 Twp. 19 County: McPherson	S. R. East West		
Address 2:	Lease Name: Ostlund (Ostlund)			
City: Galva State: KS Zip: 67443 +				
Contact Person: Kendra Anderson	If filing a Form T-1 for multiple wells on a let the lease below:	ase, enter the legal description of		
Phone: (620) 245-7390 Fax: ()		North half of the Southeast Quarter (N/2 SE/4) of Section Ten (10), Township Nineteen South (19S), Range Two West (2W).		
Email Address: anderken@yahoo.com	· · · · · · · · · · · · · · · · · · ·			
Surface Owner Information:				
Name: Ostlund Natural Resources	When filing a Form T-1 involving multiple su			
Address 1: P.O. Box 473	sheet listing all of the information to the left owner information can be found in the recor			
Address 2:	county, and in the real estate property tax re	cords of the county treasurer.		
City: Mt. Hope State: KS Zip: 67108 +	- -			
are preliminary non-binding estimates. The locations may be enter Select one of the following:	red on the Form C-1 plat, Form CB-1 plat, or a se	parate plat may be submitted.		
I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, f □ I have not provided this information to the surface owner(s).	be located: 1) a copy of the Form C-1, Form Clorm being filed is a Form C-1 or Form CB-1, the ax, and email address. 1. I acknowledge that, because I have not provid	B-1, Form T-1, or Form plat(s) required by this ed this information, the		
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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	dling fee with this form. If the fee is not received CP-1 will be returned.	with this form, the KSONA-1		
I hereby certify that the statements made herein are true and corre	ect to the best of my knowledge and belief.			
Date: 1-4-16 Signature of Operator or Agent:	ele CeleTitle:	KCC WICHITA		
1	1140	FEB 0 3 2016		

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, Effective Date of Transfer: _ KS Dept of Revenue Lease No.: 117005 Check Applicable Boxes: Oil Lease: No. of Oil Wells _____1 Lease Name: Anderson Bud (Bud Anderson) Gas Lease: No. of Gas Wells _____ <u>NE NE NW Sec. 1 Twp. 205 R. 2</u> E✓W Legal Description of Lease: Northwest Quarter of the Northwest Quarter (NW/4 NW/4) and the North 9.05 acres of Gas Gathering System: ___ Saltwater Disposal Well - Permit No.: _____ t Quarter of the Northwest Quarter (N. 9,05 Ac NE/A NN/A), Section One (1), Township Twenty South (20S) Range Two West (2W) _ feet from \square N / \square S Line __feet from __ E / __ W Line Spot Location: _ County: McPherson Enhanced Recovery Project Permit No.: _ Production Zone(s): Entire Project: Yes No Number of Injection Wells Injection Zone(s):____ Field Name: Ritz - Canton ** Side Two Must Be Completed. ____ feet from \[\int N / \[\int S \ Line of Section (API No. if Drill Pit, WO or Haul) Drilling Surface Pit Permit No.: _____ Workover Haul-Off Contact Person: Kendra Anderson Settling Burn Emergency Type of Pit: Phone: 620-245-7390 5731 KEC WICHITA Past Operator's License No. Past Operator's Name & Address: Kent Anderson 1-4-16 Date: -308 N. Main, Galva, KS 67443-8803 Signature: RECEIVED Contact Person: Kendra Anderson Phone: 620-245-7390 35275 Oil / Gas Purchaser: CHS McPherson Refinery Inc. New Operator's License No. -New Operator's Name & Address: Kendra A. Anderson 509 N. Santa Fe St., Galva, KS 67443 Signature: _ Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #______ noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Title: ___ Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit. the new operator of the above named lease containing the surfac __ is acknowledged as the new operator and may continue to inject fluids as authorized by permitted by No.: Permit No.: _______. Recommended action: _ Authorized Signature Authorized Signature PRODUCTION ____ District _ New Operator DISTRICT ---Mail to: Past Operator _

Must Be Filed For All Wells

* Lease Name:	Anderson Bud (Bud (Bud Anderson Bud (Bud (Bud (Bud (Bud (Bud (Bud (Bud	erson)	* Location:	NE NE NW Sec. 1, T2	0S, R2W
Well No.	API No. (YR DRLD/PRE '67)		n Section Line from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-113-20954	270 Circle	2830 (FEL) FWL	Oil	Prod
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	-	
T. 797.4.1		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/F W L		***************************************
	-	FSL/FNL	FEL/FWL		
	•	FSL/FNL	FEL/F W L		~
		FSL/FNL	FEL/FWL		-
and the state of t		FSL/FNL	FEL/FWL		
NAME OF THE OWNER.		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/F W L		
		FSL/FNL	FEL/FWL		
···		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
7700		FSL/FNL	FEL/FWL		KCC WICHIT
					FEB 0.3 2016
			FEL/FWL		RECEIVED
<u></u>			FEUFWL		

^{*} 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.

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

Name: Kendra A. Anderson Address 1: 509 N. Santa Fe St. Address 2: City: Galva State: KS Zip: 67443 + Email Address: anderken@yahoo.com Surface Owner Information: Name: Maynard Kent & Cinda L. Anderson Rev. Trusts - ttee Address 1: 308 N. Main St. Address 2: City: Galva State: KS Zip: 67443 + Address 3: 308 N. Main St. Address 4: 308 N. Main St. Address 5: 308 N. Main St. Address 6: 309 N. Santa Fe St. When filing a Form 7-1 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.	25275	
Address 2: Cliy: Galva State: KS Zlp: 67443 +	OPERATOR: License # 35275	
Address 2: City: Galva State: KS Zip: 67443 +	Name: 1509 N. Santa Fe St	NE_NE_NW Sec. 1 Twp. 20 S. R. 2 East X West
Corlact Person: Kendra Anderson Conlact Person: Kendra Anderson Phone: (\$\frac{620}{245-7390}\$ Fax: (County: McPnerson
Contact Person: Kendra Anderson ### Phone: (620	Address 2: KS 67/43	Lease Name: Anderson Bud (Bud Anderson) Well #: 1
Surface Owner Information: Name: Maynard Kent & Cinda L. Anderson Rev. Trusts - ttee Address 1: 308 N. Main St. Address 2: State: KS Zip: 67443 + 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 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 affiling 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 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.	State: No Zip: 07443 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description o
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10to 1 77/10 Oc. 1 4 O 4	If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathothe KCC with a plat showing the predicted locations of lease roads, tan are preliminary non-binding estimates. The locations may be entered of Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be I 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, a I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface ov task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the I fechoosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	Act (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. Acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this is of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 will be returned.

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 Effective Date of Transfer: _ 1/4/2016 Gas Lease: No. of Gas Wells ** KS Dept of Revenue Lease No.: 117179 Gas Gathering System:_ Lease Name: Thompson B (Thompson B) Saltwater Disposal Well - Permit No.: ___ _____feet from N / S Line Legal Description of Lease: ______North half of the Southeast Quarter (N/2 SE/4) of Section _____feet from E / W Line Twenty-Two (22), Township Nineteen (19) South, Range Two (2) West containing 80 acres more or less. Enhanced Recovery Project Permit No.: _ Entire Project: Yes No County: McPherson Number of Injection Wells __ Production Zone(s): Mississippian System Field Name: _Ritz - Canton Injection Zone(s):____ ** Side Two Must Be Completed. Surface Pit Permit No.: __ feet from N / S Line of Section (API No. if Drill Pit, WO or Haul) feet from E / W Line of Section Type of Pit: Settling Emergency Burn Haul-Off Workover Drilling Past Operator's License No. 5731 Contact Person: __Kendra Anderson Past Operator's Name & Address: Kent Anderson Phone: 620-245-7390 308 N. Main, Galva, KS 67443-8803 1-4-16 Signature: 76 C KCC WICHITA Title: Contact Person: Kendra Anderson 35275 New Operator's License No. New Operator's Name & Address: Kendra A. Anderson Phone: 620-245-7390 509 N. Santa Fe St., Galva, KS 67443 Oil / Gas Purchaser: CHS McPherson Refinery Inc. Signature: The Cal Title: ___ Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #_ 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 ____ 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 _____. Recommended action: _ permitted by No.: ____ Date: Authorized Signature Authorized Signature DISTRICT _____ ____ EPR __ PRODUCTION ___ Mail to: Past Operator ___ __ New Operator __ District ___

Must Be Filed For All Wells

* Lease Name:	Thompson B (Thompson	B)		* Location:	NE NE SE Sec. 22, T1	9S, R2W
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr			Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-113-20976	2310 FSI/FNL	330	Circle FEL/FWL	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		
		FSL/FNL	-	_ FEL/FWL		-
The same of the sa		FSL/FNL		FEL/FWL		
		FSL/FNL		FEL/FWL		
		FSL/FNL		_ FEL/FWL		
	-					
		FSL/FNL		FEL/FWI		
		FSL/FNL		_FEL/FWL		
		FSL/FNL		_ FEL/FWL		
		FSL/FNL		FEL/FWL		
		FSL/FNL		FEL/FWL		-
V-1, , , , , , , , , , , , , , , , , , ,		FSL/FNL				KCC WICHIT
				_FEL/FWL		FEB 0 3 20#
		FSL/FNL		FEL/FWL		RECEIVED
		FSL/FNL		_ FEL/FWL		**************************************
		FSL/FNL		_ FEL/FWL		

^{*} 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.

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

OPERATOR: License # 35275	Well Location:
Name: Kendra A. Anderson Address 1: 509 N. Santa Fe St.	County: McPherson
Address 2:	Lease Name: Thompson B (Thompson B) Wall # 1-B
Cin., Galva	
Contact Person: Kendra Anderson	the lease below:
Contact Person: Kendra Anderson Phone: (620) 245-7390 Fax: ()	
Email Address: anderken@yahoo.com	_
Surface Owner Information:	
Name: Debra L (Decker) Edwards ETAL	When filing a Form T-1 involving multiple surface owners, attach an additi
Address 1: 978 14th Ave.	OWNER INTORMATION CAN BE TOURD IN the records of the register of decade (-)
Address 2:	county, and in the real estate property tax records of the county treasurer.
ne need with a plat showing the predicted locations of lease roads.	athodic Protection Borehole Intent), you must supply the surface owners a tank batteries, pipelines, and electrical lines. The locations shown on the p
no NOO with a plat showing the predicted locations of lease roads.	athodic Protection Borehole Intent), you must supply the surface owners a tank batteries, pipelines, and electrical lines. The locations shown on the p ed on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitt
ire preliminary non-binding estimates. The locations may be entered select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will the subject well in	tank batteries, pipelines, and electrical lines. The locations shown on the ped on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. The Act (House Bill 2032), I have provided the following to the surface pelocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form the plat (s) a Form C-1 or Form CB-1, the plat (s) required by this
ire preliminary non-binding estimates. The locations or lease roads, are preliminary non-binding estimates. The locations may be entered in the select one of the following: 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 filling in connection with this form; 2) if the form; and 3) my operator name, address, phone number, factoric I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface	tank batteries, pipelines, and electrical lines. The locations shown on the ped on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted on the Form C-1 plat, Form CB-1, Form T-1, or Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this ex, and email address. I acknowledge that, because I have not provided this information, the electric of the CC performing this execution of the surface owner by filling out the top position of this form and the surface owner by filling out the top position of this form and
ire preliminary non-binding estimates. The locations may be entered select one of the following: 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 following; and 3) my operator name, address, phone number, factorized in the following in the surface owner (s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the choosing the second option, submit payment of the \$30.00 handling the second option, submit payment of the \$30.00 handling the second option, submit payment of the \$30.00 handling the second option.	tank batteries, pipelines, and electrical lines. The locations shown on the ped on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted to the surface of located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form or being filed is a Form C-1 or Form CB-1, the plat(s) required by this x, and email address. I acknowledge that, because I have not provided this information, the electric owner(s). To mitigate the additional cost of the KCC performing this less of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.
Are preliminary non-binding estimates. The locations may be entered select one of the following: 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 following; and 3) my operator name, address, phone number, factoric will be required to send this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address, I am being charged a \$30.00 handling fee, payable to the choosing the second option, submit payment of the \$30.00 handling true and the associated Form C-1, Form CB-1, Form T-1, or Form Canada the correct payable to the choosing the second option of the second optio	the control of the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted on the Form C-1 plat, Form CB-1, Form T-1, or Form CB-1, Form T-1, or Form T-1, or Form Deing filed is a Form C-1 or Form CB-1, the plat(s) required by this x, and email address. I acknowledge that, because I have not provided this information, the e owner(s). To mitigate the additional cost of the KCC performing this ess of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONACP-1 will be returned.
ire preliminary non-binding estimates. The locations may be entered select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will the CP-1 that I am filing in connection with this form; 2) if the following; and 3) my operator name, address, phone number, factorized will be required to send this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address, I am being charged a \$30.00 handling fee, payable to the choosing the second option, submit payment of the \$30.00 handling transport of the second option, submit payment of the \$30.00 handling transport of the second option, submit payment of the second option.	the control of the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted on the Form C-1 plat, Form CB-1, Form T-1, or Form CB-1, Form T-1, or Form T-1, or Form Deing filed is a Form C-1 or Form CB-1, the plat(s) required by this x, and email address. I acknowledge that, because I have not provided this information, the e owner(s). To mitigate the additional cost of the KCC performing this ess of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONACP-1 will be returned.

Kansas Corporation Commission Oil & Gas Conservation Division

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

Check Applicable Boxes:	MUST be submitted with this form.
✓ Oil Lease: No. of Oil Wells**	Effective Date of Transfer:
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 104174
Gas Gathering System:	
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N /	S Line SE <u>SE Sec. 36 Twp. 198 R. 2</u> EVW
feet from E /	W Line Legal Description of Lease: Southeast Quarter of the Southeast Quarter
Enhanced Recovery Project Permit No.:	(SE/4 SE/4 SE/4) of Section Thirty-Six (36), Township Nineteen South (19S), Range Two West (2W).
Entire Project: Yes No	County: McPherson
Number of Injection Wells **	Production Zone(s):
Field Name: Ritz - Canton	
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.: (API No. if Drill Pit, WO or Ha	feet from E / W Line of Section
Type of Pit: Emergency Burn	Settling Haul-Off Workover Drilling
Past Operator's License No. 5731	Contact Person: Kendra Anderson
Past Operator's Name & Address:Kent Anderson	Phone: 620-245-7390
308 N. Main, Galva, KS 67443-8803	4 13 . /
Title:	,
New Operator's License No. 35275	Contact Person: Kendra Anderson
New Operator's Name & Address: Kendra A. Anderson	Phone: 620-245-7390 KCC WICH
509 N. Santa Fe St., Galva, KS 67443	Oil / Gas Purchaser: CHS McPherson Refinery Inc.
	Date: 1-4-16 FEB 83 2011
Title:	RECEIVE
Acknowledgment of Transfer: The above request for tra	nsfer of injection authorization, surface pit permit # has been
	nsas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any owners	·
is ac	knowledged 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: _	
Date:	Date:
Mail to: Past Operator	PRODUCTION UIC New Operator District
	. Divitor

Must Be Filed For All Wells

* Lease Name:	J.J. Becker (J.J. Becker)		* Location:	SE SE SE Sec. 36, T1	9S, R2W
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-113-05151	330 Circle	330 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		
		EQL/FAII	FEL/FWL		
			FEL/FWL		
			FEL/FWL		
			FEL/FWL		-: 11 -
			FEL/FWL		FEB 0 3 2016
					KECEIVED
		FSL/FNL			
		FSL/FNL	FEL/FWL		

^{*} 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.

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

OPERATOR: License # 35275	Well Location:
	SE_SE_SE_Sec. 36 Twp. 19 S. R. 2 East X West
Name: Kendra A. Anderson Address 1: 509 N. Santa Fe St.	County: McPherson
Address 2:	Lease Name: J.J. Becker (J.J. Becker) Well #: 1
City: Galva State: KS Zip: 67443 +	
Contact Person: Kendra Anderson	— If filing a Form T-1 for multiple wells on a lease, enter the legal description o the lease below:
Phone: (620) 245-7390 Fax: ()	
Email Address: anderken@yahoo.com	
Surface Owner Information:	
Name: Elaine M Morse Trust TTEE	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: 26 Lois Ln.	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.
Address 2:	_
the NCC with a plat snowing the predicted locations of lease roads, t	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat
the NCC with a plat snowing the predicted locations of lease roads, t	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
are preliminary non-binding estimates. The locations may be entere Select one of the following: I certify that, pursuant to the Kansas Surface Owner Noticowner(s) of the land upon which the subject well is or will be	ank batteries, pipelines, and electrical lines. The locations shown on the plat of on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. E. Act (House Bill 2032), I have provided the following to the surface elocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form mobeing filed is a Form C-1 or Form CB-1, the plat(s) required by this
 ACC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered. Select one of the following: 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 forform; and 3) my operator name, address, phone number, factorized in the surface owner(s). I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface 	e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1 provided the following to the surface me being filed is a Form C-1 or Form CB-1, the plat(s) required by this is, and email address. I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this less of the surface owner by filling out the top section of this form and
are preliminary non-binding estimates. The locations may be entere Select one of the following: 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 for form; and 3) my operator name, address, phone number, fax I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the surface owner(s).	e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this is, and email address. I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this less of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.
 Account a plat snowing the predicted locations of lease roads, the are preliminary non-binding estimates. The locations may be entered. Select one of the following: 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 filling in connection with this form; 2) if the forform; and 3) my operator name, address, phone number, fax I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the surface owner(s). 	ank batteries, pipelines, and electrical lines. The locations shown on the plat of on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Act (House Bill 2032), I have provided the following to the surface elecated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form me being filed is a Form C-1 or Form CB-1, the plat(s) required by this c, and email address. I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this less of the surface owner by filling out the top section of this form and ele KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 in the plat (s) in
are preliminary non-binding estimates. The locations may be entered. Select one of the following: 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 forform; and 3) my operator name, address, phone number, fax I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the surface owner(s). If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CB-1.	ank batteries, pipelines, and electrical lines. The locations shown on the plat of on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Act (House Bill 2032), I have provided the following to the surface elecated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this is, and email address. I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this less of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 in the less of my knowledge and belief.

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 Effective Date of Transfer: __1/4/2016 Gas Lease: No. of Gas Wells _____** KS Dept of Revenue Lease No.: 104175 Gas Gathering System:_ Lease Name: Becker P.J. (Becker, P.J.) Saltwater Disposal Well - Permit No.: ____ feet from N/ S Line Legal Description of Lease: Southeast Quarter of the Northeast Quarter (SE/4 NE/4) of feet from E / W Line Enhanced Recovery Project Permit No.: ___ Section Thirty-Six (36), Township Nineteen South (19S) Range Two West (2W) containing 40 acres more or less. Entire Project: Yes No County: McPherson Number of Injection Wells __ Production Zone(s): Field Name: _Ritz - Canton Injection Zone(s):____ ** Side Two Must Be Completed. Surface Pit Permit No.: __ feet from __ N / __ S Line of Section (API No. if Drill Pit, WO or Haul) feet from E / W Line of Section Emergency Type of Pit: Burn Settling Haul-Off Workover Drilling Past Operator's License No. 5731 Contact Person: Kendra Anderson Past Operator's Name & Address: Kent Anderson Phone: 620-245-7390 308 N. Main, Galva, KS 67443-8803 KCC WICHITA Title: ___ 35275 Contact Person: Kendra Anderson New Operator's License No. _ RECEIVED New Operator's Name & Address: Kendra A. Anderson Phone: 620-245-7390 509 N. Santa Fe St., Galva, KS 67443 Oil / Gas Purchaser: CHS McPherson Refinery Inc. Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #_ 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 the new operator of the above named lease containing the surface pit _____. Recommended action: permitted by No.: Authorized Signature Authorized Signature DISTRICT _ _ EPR _ PRODUCTION ___ Mail to: Past Operator ___ New Operator_ District

Must Be Filed For All Wells

* Lease Name:	Becker P.J. (Becker, P.J.)		* Location:	N2 SE NE Sec. 36, T1	9S, R2W
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)
1	15-113-01319	1680 Circle	580 Circle	Oil	Prod
		FSL/FNL	FEL/F W L		
* , ,,		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		
		FSL/FNL	FEL/FWL		
·		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/F W L		
=		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
-		FSL/FNL	FEL/FWL		
					KCC MICH
					FEB 0-3 701E
					KECLIVED
		FSL/FNL			

^{*} 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.

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

OPERATOR: License # 35275	Well Location:
	N2 _SE _NE _Sec. 36 _Twp. 19 _S. R. 2 East 🗷 West
Name: Kendra A. Anderson Address 1: 509 N. Santa Fe St.	County: McPherson
Address 2:	Lease Name: Becker P.J. (Becker P.J.) Well #: 1
City: Galva State: KS Zip: 67443 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: Kendra Anderson	the lease below:
Phone: (620) 245-7390 Fax: ()	
Email Address: anderken@yahoo.com	
Surface Owner Information:	** · · · · · · · · · · · · · · · · · ·
Name: Duane G & Jenine S Becker	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: 1269 24th Ave.	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:	
o: Galva o: KS = 67443	
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Country the KCC with a plat showing the predicted locations of lease roads	Cathodic Protection Borehole Intent), you must supply the surface owners and s, tank batteries, pipelines, and electrical lines. The locations shown on the plat
If this form is being submitted with a Form C-1 (Intent) or CB-1 (C the KCC with a plat showing the predicted locations of lease roads are preliminary non-binding estimates. The locations may be ente	Cathodic Protection Borehole Intent), you must supply the surface owners and
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Intent)	Cathodic Protection Borehole Intent), you must supply the surface owners and is, tank batteries, pipelines, and electrical lines. The locations shown on the plat red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Itice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Intent) or CB-1 (Intent) and the KCC with a plat showing the predicted locations of lease roads are preliminary non-binding estimates. The locations may be enterested to be of the following: I certify that, pursuant to the Kansas Surface Owner Norowner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, I have not provided this information to the surface owner(s KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address.	Cathodic Protection Borehole Intent), you must supply the surface owners and is, tank batteries, pipelines, and electrical lines. The locations shown on the plat red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Itice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Intent) the KCC with a plat showing the predicted locations of lease roads are preliminary non-binding estimates. The locations may be enterested one of the following: I certify that, pursuant to the Kansas Surface Owner Norowner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, I have not provided this information to the surface owner(see KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addithat I am being charged a \$30.00 handling fee, payable to the surface owners of the second option, submit payment of the \$30.00 handling fee, payable to the second option, submit payment of the \$30.00 handling fee.	Cathodic Protection Borehole Intent), you must supply the surface owners and is, tank batteries, pipelines, and electrical lines. The locations shown on the plat red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Itice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filled is a Form C-1 or Form CB-1, the plat(s) required by this fax, and email address. I acknowledge that, because I have not provided this information, the ce owner(s). To mitigate the additional cost of the KCC performing this dress of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Intent) the KCC with a plat showing the predicted locations of lease roads are preliminary non-binding estimates. The locations may be enterested one of the following: I certify that, pursuant to the Kansas Surface Owner Norowner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, I have not provided this information to the surface owner(stack, I acknowledge that I must provide the name and ad that I am being charged a \$30.00 handling fee, payable to	Cathodic Protection Borehole Intent), you must supply the surface owners and a, tank batteries, pipelines, and electrical lines. The locations shown on the plat ared on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Itice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filled is a Form C-1 or Form CB-1, the plat(s) required by this fax, and email address. I acknowledge that, because I have not provided this information, the ce owner(s). To mitigate the additional cost of the KCC performing this dress of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 in CP-1 will be returned.
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Intent) the KCC with a plat showing the predicted locations of lease roads are preliminary non-binding estimates. The locations may be enterescence of the following: I certify that, pursuant to the Kansas Surface Owner Norowner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, I have not provided this information to the surface owner(see KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addithat I am being charged a \$30.00 handling fee, payable to the surface owner of the surface owner owne	Cathodic Protection Borehole Intent), you must supply the surface owners and is, tank batteries, pipelines, and electrical lines. The locations shown on the plat ared on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Itice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filled is a Form C-1 or Form CB-1, the plat(s) required by this fax, and email address. I acknowledge that, because I have not provided this information, the ce owner(s). To mitigate the additional cost of the KCC performing this dress of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 in CP-1 will be returned.

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

Check Applicable Boxes:	I
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.:
Gas Gathering System: E25635.1	Lease Name: Miller
Sanwater Disposal Well - Permit No.:	NW _ SW _ SE Sec. 36 Twp. 198 R. 2 E V W
Spot Location: 1004 feet from N / S Line	Legal Description of Lease: 1004 North, 1991 West from SE Corner
1991 feet from ✓ E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: McPherson
Number of Injection Wells **	Production Zone(s):
Field Name: Round Hill	Injection Zone(s):
** Side Two Must Be Completed.	Tijoudi Zolio(o).
Surface Pit Permit No.:	feet from N/ S Line of Section
(API No. if Drill Pit, WO or Haul)	feet from F / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
Past Operator's License No5731	Contact Person: Kendra Anderson
Past Operator's Name & Address: Kent Anderson	Phone: 620-245-7390
308 N. Main, Galva, KS 67443-8803	Date: /- 4-16
Title:	Signature: The Ch
New Operator's License No. 35275	Contact Person: Kendra Anderson
New Operator's Name & Address: Kendra A. Anderson	Phone: 620-245-7390 CC WICHI
509 N. Santa Fe St., Galva, KS 67443	Oil / Goo Burchager: CHS McPherson Refinery Inc.
	Date: 1-4-16
	RECEIVED . RECEIVED
Title:	Signature: Make and RECEIVEL
Acknowledgment of Transfer: The above request for transfer of injection	n authorization, surface pit permit # has been
noted, approved and duly recorded in the records of the Kansas Corporation	on Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the	e 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	
Permit No.: Recommended action:	permitted by No.:
Date:	Date: Authorized Signature
Authorized Signature	
1	PRODUCTION UIC
Mail to: Past Operator New Operator	rator District

Must Be Filed For All Wells

* Lease Name:	Miller		* Location:	NW SW SE Sec. 36, T	19S, R2W
Well No.	API No. (YR DRLD/PRE '67)	Footage from S (i.e. FSL = Feet fro		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-113-20694-0001	1004 Circle	1991 Circle FEL FWL	SWD	
	VV-TAK-SAN-Var-VAR-VAR-VAR-VAR-VAR-VAR-VAR-VAR-VAR-VAR	FSL/FNL	FEL/F W L		
	w	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		
		FSL/FNL	FEL/FWL		
 					
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/F W L		KCC WICHIT
		FSL/FNL	FEL/FWL		FEB 0 3 2016
***************************************		FSL/FNL	FEL/FWL		RECEIVED
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	***************************************	

^{*} 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.

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

OPERATOR: License # 35275	_ Well Location:
Name: Kendra A. Anderson	<u>NW_SW_SE_Sec. 36Twp. 19_S.R. 2</u> East X Wes
Address 1: 509 N. Santa Fe St.	County: McPherson
Address 2:	Lease Name: Miller Well #: 3
City: Galva State: KS Zip: 67443 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: Kendra Anderson	the lease below: _
Phone: (620) 245-7390 Fax: ()	_
Email Address: anderken@yahoo.com	_
Surface Owner Information:	
Name: Marlys A Marston Rev. Trust	_ When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: 1 Park Ave Apt 114	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: Hillsboro State: KS Zin: 67063 +	
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Ca	thodic Protection Borehole Intent), you must supply the surface owners and
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Ca the KCC with a plat showing the predicted locations of lease roads, t are preliminary non-binding estimates. The locations may be entere	
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Ca the KCC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be enterestimated one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plad on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted e. 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 me being filed is a Form C-1 or Form CB-1, the plat(s) required by this
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Ca the KCC with a plat showing the predicted locations of lease roads, the are preliminary non-binding estimates. The locations may be entered. Select one of the following: 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 forform; and 3) my operator name, address, phone number, factory in the provided this information to the surface owner(s). KCC will be required to send this information to the surface.	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted as 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 m being filed is a Form C-1 or Form CB-1, the plat(s) required by this k, and email address. I acknowledge that, because I have not provided this information, the electron of the country of the surface owner by filling out the top section of this form and
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, the are preliminary non-binding estimates. The locations may be entere Select one of the following: 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; and 3) my operator name, address, phone number, factory in the provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address, I am being charged a \$30.00 handling fee, payable to the surface of the second option, submit payment of the \$30.00 handling fee, payable to the surface of the second option, submit payment of the \$30.00 handling fee.	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted electrical lines. It have provided the following to the surface see located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form me being filled is a Form C-1 or Form CB-1, the plat(s) required by this candemail address. I acknowledge that, because I have not provided this information, the lowner(s). To mitigate the additional cost of the KCC performing this less of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, it are preliminary non-binding estimates. The locations may be entered. Select one of the following: 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 filling in connection with this form; 2) if the form; and 3) my operator name, address, phone number, factorized in the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the surface owner (s).	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted as electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted by the electric lines and lines are located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form of the being filed is a Form C-1 or Form CB-1, the plat(s) required by this can demail address. I acknowledge that, because I have not provided this information, the electric lines and the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-CP-1 will be returned.
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, the are preliminary non-binding estimates. The locations may be entere Select one of the following: 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; and 3) my operator name, address, phone number, factory in the provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address, I am being charged a \$30.00 handling fee, payable to the surface of the second option, submit payment of the \$30.00 handling fee, payable to the surface of the second option, submit payment of the \$30.00 handling fee.	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted elected. It is a copy of the Form C-1, Form CB-1, Form T-1, or Form me being filed is a Form C-1 or Form CB-1, the plat(s) required by this c, and email address. I acknowledge that, because I have not provided this information, the electric owner(s). To mitigate the additional cost of the KCC performing this less of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-CP-1 will be returned.

Kansas Corporation Commission Oil & Gas Conservation Division

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

Check Applicable Boxes.	i
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 1/4/2016
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 104210
Gas Gathering System:	Lease Name: Krehbiel A (Krehbiel A)
Saltwater Disposal Well - Permit No.: E14770.1	SW _ SW _ NW Sec33 _Twp185 _R1 E V W
Spot Location: 4850 feet from N / S Line	Legal Description of Lease: Northwest Quarter (NW/4) of Section Thirty-Three (33),
4978 feet from 📝 E / 🗌 W Line	
Enhanced Recovery Project Permit No.:	Township Eighteen South (18S), Range One West (1W)
Entire Project: Yes No	County: McPherson
Number of Injection Wells **	Production Zone(s):
Field Name: Round Hill	Injection Zone(s):
** Side Two Must Be Completed.	Injection Zune(s).
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
Past Operator's License No. 5731	Contact Person: Kendra Anderson
Past Operator's Name & Address: Kent Anderson	Phone: 620-245-7390
308 N. Main, Galva, KS 67443-8803	Date: 1 - 4-16
	Signature: MCC WICHITA
Title:	Signature: FFR 0.3 7016
25275	
New Operator's License No. 35275	Contact Person: Kendra Anderson RECEIVED
New Operator's Name & Address: Kendra A. Anderson	Phone: 620-245-7390
509 N. Santa Fe St., Galva, KS 67443	Oil / Gas Purchaser: CHS McPherson Refinery Inc.
· · · · · · · · · · · · · · · · · · ·	Date: 1-4-16
Title:	Signature: The colo
Tige:	Signature.
Acknowledgment of Transfer: The above request for transfer of injection a	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	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 pi
Permit No.: Recommended action:	permitted by No.:
- Total Most add dotter	
	Date:
Date:	Authorized Signature
1	PRODUCTION UIC
Mail to: Past Operator New Operator	or District

Must Be Filed For All Wells

KDOR Lease	No.: 104210		···		
* Lease Name:	Krehbiel A (Krehbiel A)		* Location: S	W SW NW Sec.33, T	18S, R1W
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)
1	15-113-00333	2840 FSI) FNL	200 Circle	Oil	Prod
1	15-113-02379	4850 (FSL) FNL	4978 (FEL) FWL	SWD	
		FSL/FNL	FEL/FWL		
***************************************	-	FSL/FNL	FEL/FWL		
Water Burker - Schools and Anti-Anti-Anti-Anti-Anti-Anti-Anti-Anti-		FSL/FNL	FEL/FWL		-
		FSL/FNL	FEL/FWL		
<u></u>		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	NAME OF THE OWNER OWNER OF THE OWNER OWNE	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	<u></u>	
		FSL/FNL	FEL/FWL		
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a		FSL/FNL	FEL/FWL		
<u></u>		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/F W L		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		KCC WICHITA
		FSL/FNL			FEB 0 3 2016
			FEL/FWL		RECEIVED

A separate sheet may be attached if necessary

^{*} 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.

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

Select the corresponding form being filed: C-1 (Intent) CB-1	(Cathodic Protection Borehole Intent) X T-1 (Transfer)	CP-1 (Plugging Application)
OPERATOR: License # 35275	Well Location:	a a a a a a a a a a a a a a a a a a a
Name: Kendra A. Anderson	SW SW SW Sec. 33 Twp. 18 S	En 1 Fact West
Name: Kendra A. Anderson Address 1: 509 N. Santa Fe St.	County: McPherson	. n [Last M West
Address 2:	Lease Name: Krehbiel A (Krehbiel A)	Well #· 1
City: Galva State: KS Zip: 67443 +	If filing a Form T-1 for multiple wells on a leas	
Contact Person: Kendra Anderson	the lease below:	-
Phone: (620) 245-7390 Fax: ()	Northwest Quarter (NW/4) of S	
Phone: (620) 245-7390 Fax: () Email Address: anderken@yahoo.com	Thirty-Three (33), Township E (18S), Range One West (1W)	ighteen South
Surface Owner Information: Name: Krehbiel Family Trust Etal Larry J & Betty Krehbiel Address 1: 808 Lawrence St. Address 2: City: McPherson State: KS Zip: 67460 +	When filing a Form T-1 involving multiple surfa sheet listing all of the information to the left for owner information can be found in the records county, and in the real estate property tax reco	or each surface owner. Surface s of the register of deeds for the
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered of Select one of the following:	nk batteries, pipelines, and electrical lines. The	locations shown on the plat
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 form; and 3) my operator name, address, phone number, fax, and 3 my operator name.	located: 1) a copy of the Form C-1, Form CB being filed is a Form C-1 or Form CB-1, the p	-1, Form T-1, or Form
I have not provided this information to the surface owner(s). It is KCC will be required to send this information to the surface of task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the	wner(s). To mitigate the additional cost of the s of the surface owner by filling out the top se	KCC performing this
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP		with this form, the KSONA-1
I hereby certify that the statements made herein are true and correct to	o the best of my knowledge and belief.	KCC WICHITA
Date: 1-4-16 Signature of Operator or Agent:	CTitle:	FEB 03 2016
19		RECEIVED

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

OPERATOR: License # 35275	Well Location:
Name: Kendra A. Anderson	NW_NW_NW_Sec. 33 Twp. 18 S. R. 1 East X West
Address 1: 509 N. Santa Fe St.	· · · · · · · · · · · · · · · · · · ·
Address 2:	County: McPherson Lease Name: Krehbiel A (Krehbiel A) Well #: 1
State: KS Zip: 67443 + State: KS Zip: 67443 + State: Kendra Anderson	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Contact Person:	Northwest Quarter (NW/4) of Section
Phone: (620) 245-7390 Fax: () Fax: (Thirty-Three (33), Township Eighteen South (18S), Range One West (1W)
Surface Owner Information:	
Name: Krehbiel Family Trust Etal Larry J & Betty Krehbiel	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: 808 Lawrence St.	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: McPherson State: KS Zip: 67460 +	_
the KCC with a plat showing the predicted locations of lease roads, t	thodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
the KCC with a plat showing the predicted locations of lease roads, t are preliminary non-binding estimates. The locations may be entered	tank batteries, pipelines, and electrical lines. The locations shown on the plat
the KCC with a plat showing the predicted locations of lease roads, the preliminary non-binding estimates. The locations may be entered select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	tank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. The locations shown on the plat d on the Form C-1 plat, or a separate plat may be submitted. The locations shown on the plat may be submitted. The locations shown on the plat may be submitted. The locations shown on the plat may be submitted. The locations shown on the plat may be submitted. The locations shown on the plat may be submitted. The locations shown on the plat may be submitted.
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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

Check Applicable Boxes:	
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 1/4/2016
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 134737
Gas Gathering System:	Lease Name: Nightingale (Nightingale)
Saltwater Disposal Well - Permit No.:	NENESE_Sec1_Twp19S_R2E V W
Spot Location: feet from N / S Line	Legal Description of Lease: North half of the Southeast Quarter (N/2 SE/4) of
feet from E / W Line	
Enhanced Recovery Project Permit No.:	Section One (1), Township Nineteen South (19S), Range Two West (2W).
Entire Project: Yes No	County: McPherson
Number of Injection Wells **	Production Zone(s): Mississippian System
Field Name: Jenday	Injection Zone(s):
** Side Two Must Be Completed.	injection zone(s).
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
Past Operator's License No	Contact Person: Kendra Anderson
Past Operator's Name & Address: Kent Anderson	Phone: 620-245-7390
308 N. Main, Galva, KS 67443-8803	Date: 1-4-16
	Signature: Le al MOCINICHITE
Title:	Signature: KCC WICHT!
New Operator's License No. 35275	Contact Person: Kendra Anderson FEB 0 3 2018
New Operator's Name & Address: Kendra A. Anderson	Phone: 620-245-7390 RECEIVED
509 N. Santa Fe St., Galva, KS 67443	Oil / Gas Purchaser: _CHS McPherson Refinery Inc.
	Date: 1-4-16
	
Title:	Signature: The and
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # has been
noted, approved and duly recorded in the records of the Kansas Corporation 0	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the a	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
	PRODUCTION UIC
Mail to: Past Operator New Operator	or District

Must Be Filed For All Wells

KDOR Lease	No.:134737				
* Lease Name:	Nimbinanta (Nimbinanta)		* Location:	IE NE SE Sec. 1, T19	9S, R2W
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-113-02009	2310 FSDFNL	330 Circle	Oil	Prod
2	15-113-21367	1650 (FSI) FNL	330 FEI/FWL	Oil	Prod
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	which through a life is a final to the life in the lif	
40		FSL/FNL	FEL/FWL		
Manufacture and the second		FSL/FNL	FEL/FWL		ANAMA INA INA INA INA INA INA INA INA INA IN
		FSL/FNL	FEL/FWL	Acquired to the second	
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		FSL/FNL	FEL/FWL		
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***************************************		FSL/FNL	FEL/FWL		
			FEL/FWL		
		FSL/FNL	FEL/F W L		
		FSL/FNL	FEL/FWL		
					KCC WICHITA
adouted the second of the seco					FFB 0.3 2016
					to case that
		FSL/FNL	FEL/FWL		

^{*} 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.

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

OPERATOR: License # 35275	Well Location:						
Name: Kendra A. Anderson	NE_NE_SE_Sec. 1 Twp. 19 S. R. 2 East 🗷 We						
Address 1: 509 N. Santa Fe St.							
Address 2:	Lease Name: Nightingale (Nightingale) Well #: 1						
City: Galva State: KS Zip: 67443 +							
Contact Person: Kendra Anderson	the lease below:						
Contact Person: Kendra Anderson Phone: (620) 245-7390 Fax: ()	North half of the Southeast Quarter (N/2 SE/4) of Section One (1) Township Nineteen South						
Email Address: anderken@yahoo.com	Section One (1), Township Nineteen South (19S), Range Two West (2W).						
Surface Owner Information:							
Name: Gary & Gaylene Nightingale	When filing a Form T-1 involving multiple surface owners, attach an addition						
Address 1: 1274 27th Ave.	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						
Address 2:	county, and in the real estate property tax records of the county treasurer.						
City: Canton State: KS Zip: 67428 +	_						
the KCC with a plat showing the predicted locations of lease roads,	nthodic Protection Borehole Intent), you must supply the surface owners a tank batteries, pipelines, and electrical lines. The locations shown on the p and on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitte						
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entere	tank batteries, pipelines, and electrical lines. The locations shown on the p						
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will leave.	tank batteries, pipelines, and electrical lines. The locations shown on the part on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted as the 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 the being filed is a Form C-1 or Form CB-1, the plat(s) required by this						
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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

	MAI-II I	
OPERATOR: License # 35275 Name: Kendra A. Anderson		□ Foot ₩ Wood
Name: Kendra A. Anderson Address 1: 509 N. Santa Fe St.	County: McPherson	cast 🔼 west
Address 2:	* * * * * * * * * * * * * * * * * * * *	. 2
City: Galva State: KS Zip: 67443 +	If filing a Form T-1 for multiple wells on a lease, enter the	
Contact Person: Kendra Anderson	the lease below:	-
Phone: (620) 245-7390 Fax: ()	North half of the Southeast Quarter (N	•
Email Address: anderken@yahoo.com	Section One (1), Township Nineteen S (19S), Range Two West (2W).	ooutn
Surface Owner Information:		
Name: Gary & Gaylene Nightingale Address 1: 1274 27th Ave.	When filing a Form T-1 involving multiple surface owners,	
	sheet listing all of the information to the left for each surface owner information can be found in the records of the regis	ter of deeds for the
Address 2:		ounty treasurer.
City: Canton State: KS Zip: 67428 +	_	
the KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entere Select one of the following:	ed on the Form C-1 plat, Form CB-1 plat, or a separate plat m	ay be submitted.
I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will k CP-1 that I am filing in connection with this form; 2) if the for form; and 3) my operator name, address, phone number, far	pe located: 1) a copy of the Form C-1, Form CB-1, Form T- rm being filed is a Form C-1 or Form CB-1, the plat(s) requi	t, or Form
I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address. I am being charged a \$30.00 handling fee, payable to the surface task.	e owner(s). To mitigate the additional cost of the KCC perforess of the surface owner by filling out the top section of this	nation, the rming this
KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addr	e owner(s). To mitigate the additional cost of the KCC perforess of the surface owner by filling out the top section of this ne KCC, which is enclosed with this form. In the fee is not received with this form.	nation, the rming this form and
KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addr that I am being charged a \$30.00 handling fee, payable to the second option, submit payment of the \$30.00 handless.	e owner(s). To mitigate the additional cost of the KCC perforess of the surface owner by filling out the top section of this ne KCC, which is enclosed with this form. Sing fee with this form. If the fee is not received with this for CP-1 will be returned.	nation, the rming this form and
KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addr that I am being charged a \$30.00 handling fee, payable to the second option, submit payment of the \$30.00 handlifted form and the associated Form C-1, Form CB-1, Form T-1, or Form CB-1, Form	e owner(s). To mitigate the additional cost of the KCC perforess of the surface owner by filling out the top section of this ne KCC, which is enclosed with this form. Ing fee with this form. If the fee is not received with this for CP-1 will be returned. In the best of my knowledge and belief.	nation, the rming this form and m, the KSONA-1

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

Check Applicable Boxes:	1
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 1/4/2016
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 104209
Gas Gathering System:	Lease Name: Johnson Julia (Johnson Julia)
Saltwater Disposal Well - Permit No.:	SW _ SW _ Sec28 _Twp185 _R1 F V W
Spot Location: feet from N / S Line	Legal Description of Lease: Southwest Quarter (SW/4) of Section Twenty-Eight (28),
feet from E / W Line	
Enhanced Recovery Project Permit No.:	Township Eighteen South (18S), Range One West (1W)
Entire Project: Yes No	County: McPherson
Number of Injection Wells **	Production Zone(s): Cherokee Group
Field Name: Round Hill	Injection Zone(s):
** Side Two Must Be Completed.	injection zone(s).
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
Past Operator's License No. 5731	Contact Person: Kendra Anderson
Past Operator's Name & Address: Kent Anderson	Phone: 620-245-7390
308 N. Main, Galva, KS 67443-8803	Date: 1- 4-16
	Signature: The Carl
Title:	
35275	Contact Person: Kendra Anderson
New Operator's License No. 35275	FEB U.S. AUT
New Operator's Name & Address: Kendra A. Anderson	Phone: 620-245-7390
509 N. Santa Fe St., Galva, KS 67443	Oil / Gas Purchaser: CHS McPherson Refinery Inc. RECEIVED
	Date: 1-4-16
Title:	Signature: Le Cal
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has beer
·	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the	
Commission records only and does not convey any ownership interest in the	above injection won(o) 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 pi
Permit No.: Recommended action:	permitted by No.:
Deter	Date:
Date: Authorized Signature	Authorized Signature
DISTRICT EPR	PRODUCTION UIC
	or District

Must Be Filed For All Wells

Lease Name	Johnson Julia (Johnson	Julia)	* Location:S	* Location: SW SW SW Sec. 28, T18S, R1W						
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)					
1	15-113-00539		330 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							
		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							
		FSL/FNL	FEL/FWL							
		FSL/FNL	FEL/FWL							
		FSL/FNL								
		FSL/FNL			KCC WICHITA					
		FSL/FNL			FEB 0 3 2016					
					RECEIVED					
		FSL/FNL	FEL/FWL							

^{*} 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.

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

25275	A CONTRACTOR OF THE CONTRACTOR
OPERATOR: License # 35275	
Name: Kendra A. Anderson	<u>SW_SW_SW</u> Sec. 28 Twp. 18 S. R. 1 East X Wes
Address 1: 509 N. Santa Fe St.	County: McPherson
Address 2:	Lease Name: Johnson Julia (Johnson Julia) Well #: 1
City: Galva State: KS Zip: 67443 +	
Contact Person: Kendra Anderson	the lease below:
Phone: (620) 245-7390 Fax: ()	Annual Control of the
Email Address: anderken@yahoo.com	
Surface Owner Information:	
Name: DVT Farms LC	
Address 1: 4200 Charleston Ave	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 surface owner information can be found in the records of the register of deeds for the surface owner.
Address 2:	county, and in the real estate property tax records of the county treasurer.
City: Hutchinson State: KS Zip: 67502 +	
the KCC with a plat showing the predicted locations of lease roads,	athodic Protection Borehole Intent), you must supply the surface owners an tank batteries, pipelines, and electrical lines. The locations shown on the pla
the KCC with a plat showing the predicted locations of lease roads,	athodic Protection Borehole Intent), you must supply the surface owners an
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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

MUST be submitted	20 WILL THE TOTAL
Check Applicable Boxes: Oil Lease: No. of Oil Wells 39 **	Effective Date of Transfer: JANUARY 30, 2016
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 121434
Gas Lease: No. of Gas Wells Gas Gathering System:	Lease Name: was RED DRAGON OIL - now DRAGONSLAYER, LLC
Gas Gathering System. Saltwater Disposal Well - Permit No.:	Sec. 29 Twp. 14 R. 22 ✓ E W
Saltwater Disposal Weil 1 Firm (188) Spot Location: feet from N / S Line	Legal Description of Lease: NW1/4 29 14S 22E
Spot Location:feet from E / W Line	Legal Description of Lease:
✓ Enhanced Recovery Project Permit No.: E25485	
Entire Project: Yes No	County: JOHNSON KCC WICHITA
Number of Injection Wells 21 **	Production Zone(s): BARTLESVILLE FEB 0.3 2016
Mumber of injection was	BURGESS
Field Name: ** Side Two Must Be Completed.	Injection Zone(s): RECEIVED
Side (Wo Must be compared to the property of t	
Surface Pit Permit No.:	feet from N / S Line of Section
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
Past Operator's License No. LELIA M ROBERTS 34262	Contact Person: LELIA M ROBERTS
Past Operator's License No.	Phone: 913-764-2859
Past Operator's Name & Address: LELIA M ROBERTS	FEBRUARY 1, 2016 Date:
PO BOX 421, OLATHE, KS 66051	
Title: OPERATOR	Signature Till the Lord of illia Med
THO.	
New Operator's License No. 35289	Contact Person: JUDITH L MUSGRAVE
New Operator's Name & Address: DRAGONSLAYER, LLC	Phone: 817-300-7034
New Operator's Name & Address. 25975 W 143RD PL, OLATHE, KS 66061-7554	Oil / Gas Purchaser: COFFEYVILLE RESOURCES
25975 W 143RD FL, OLATTE, NO 000	FEBRUARY 1, 2016
	Signature: Judilla Mugyuus
Title:	Signature.
	has been
Acknowledgment of Transfer: The above request for transfer of injection	on authorization, surface pit porting an authorization. This acknowledgment of transfer pertains to Kansas Corporation
the records of the Kansas Corporati	on Commission
noted, approved and duly recorded in the reserved and overship interest in the commission records only and does not convey any ownership interest in the convey and ownership in the convey and ownership interest in the convey and ownership in the	the above injection well(s) of proposition
	is acknowledged as
is acknowledged a	the share named lease containing the surface pit
the new operator and may continue to inject fluids as authorized t	
Permit No.: Recommended action:	permitted by No.:
Permit No.:	
Data	Date:Authorized Signature
7(0)071254 13	UIC
DISTRICT EPR	PRODUCTION UIC
Mail to: Past OperatorNew O	DO10101

Must Be Filed For All Wells

	4500	F		Tom 1 1 A I . 11	M-U 04-4
Vell No.	API No. (YR DRLD/PRE '67)	Footage from Secti (i.e. FSL = Feet from S		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandone
	see attached well inventory	Circle FSL/FNL	Circle FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
N. H. J. J. J. H. H. L.	MANAGEM OF THE PROPERTY OF THE	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		
		FSL/FNL	FEL/FWL		
*		FSL/FNL	FEL/FWL		
			FEL/FWL	· · · · · · · · · · · · · · · · · · ·	NICHITA
		FSL/FNL	FEL/FWL	FEB R	0.3 2016
	анмания в мания протого положения по	FSL/FNL	FEL/FWL	FED	ECEIVED
		FSL/FNL	FEL/FWL		
			FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		MARKET
		FSL/FNL	FEL/FWL		

^{*} 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.

KOOR LEASE No.

Section | KCC Forms | Loansing | Ad Vatorem | Sections | Tools | Heep |
Well Inventory - Snapshot

Group 1403 KCC Lic 34382 User 34528 Justin Muserine Lelia M. Robe

Well Inventory According to the KCC Roberts, Lelia M June 01, 2015

Excel

umber of wells: 6							.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				·····					·;	Ţ 	Gas	Oii			
7.7			Year Orilled	Year Assum	Depth	County	Sec	Twp	Rge Dir	Q4	Q3	ÓS	Q1	Feet N-S N-S	Feet E-W E-W	Well Type	Status	Lease Codes	Lease Codes	Latitude	Longitude	Datum
ease Name Well	io, . API Numb	e	CHINA	Respo	ССРС			. 1	- 1	•	1			2464 N	175 W	OIL	: PR	; ••••	121434			
RED DRAGON 1	15-091-2	1249-0000			862	Johnson	29	14	22 E	SW	sw	SW	NW NW	3300 S	4620 E	OIL	PR		121434			
RED DRAGON 10	15-091-2	1562-0000				Johnson	29	14	22 E			SW	NW NW	4640 S	3650 E	OIL	PR		121434			
HED DRAGON 11	15-091-2	1593-0000			900	Johnson	29	14	22 E	sw	NW SE	NE SW	KW.	3295 5	4125 E	OIL	PR		121434			
RED DRAGON 12	15-091-2	1620-0000				Johnson	29	14	22 E	NE NW	SW	SE	NW	3216 S	3640 E	OIL	PK		121434			
RED DRAGON 13	15-091-2	1634-0000				Johnson	29	14	22 E	SW	NE	SE	NW	3310 S	3216 E	OIL	PR.		121434			
PED DRAGON 15	15-091-2	1687-0000	1985			Johnson	29	14	22 E		SW	5E	#NY	3216 5	3310 E	OIL	PR		121434			
RED DRAGON 16	15-091-2	1749-0000	1985			Johnson	29	14	22 E	NE NE	SE	SE.	NW	3216 5	2890 €	OIL	PR		121434			
RED DRAGON 17	15-091-2	1754-0000	1986			Johnson	29	14	22 E			SE	NSY	3516 S	3135 E	OIL	PR		121434			
RED DRAGON 18	15-091-2	1831-0000	1987			Johnson	29	14	22 E	SW	NE		NW.	3546 5	3640 E	OiL	PR		121434			
RED DRAGON 19	15-091-2	1881-0000	1987		920	Johnson	29	14	22 E	SW	With	SE SW	N/W	3245 S	4775 E	EOR	TN					
RED DRAGON 2	15-091-2	1303-0001			863)ohnson	29	14	22 E		SW				4675 E	WSW	PR		121434			
BED DRAGON 20	15-091-2	1955-0000	1958		500	Johnson	29	14	22 €		N2	WA	WW	5115 S 4675 S	4675 E	OIL	PR		121434			
RED DRAGON 21	15-091-2	1958-0000	1988		960	Johnson	29	14	22 E	SE	NW	NW	NW NW	4300 5	4675 E	OIL	PR		121434			
RED DRAGON 22	15-091-2	1960-0000	1988		900	lohnson	29	14	22 E	NE	sw	NW			4455 E	OIL	PR		121434			
RED DRAGON 23	15-091-2	1972-0000	1988		900	ncendol	29	14	22 E	MA	SE	SW	NW	3058 5	5115 E	OIL	PR		121434			
RED DRAGON 24	15-091-2	2068-0000	1989		926	Johnson .	29	14	22 E	5W	NW	NW	WW	4785 5	4895 E	EOR	101		122.00			
RED DRAGON 25-1	15-091-2	2081-0000	:989		380	Johnson	29	14	27 E		NW	mw	NW	4930 5	3430 E	EOR	EN					
KED DRAGON 26-1	15-091-2	2082-0000	1989		880	Johnson	29	14	22 E	SE	NW	SE	NW.	3375 5		OIL	PR		121434			
RED DRAGON 27	15-091-2	2191-0000	1990		910	Johnson	29	14	22 €		sw	NE	MM	3986 5	3640 E	OIL	PR.		121434			
RED DRAGON 28		2192-0000	1990		891	Tohnson	29	14	22 E	SW	SE	ĦĒ	MA	3986 5	3200 E	OIL	PR		121434			
RED DRAGON 29	15-091-2	2282-0000	1991		910	Johnson	29	14	22 E		SW	NE	NW	4445 S	3529 €		PR		121434			
RED DRAGON 3		1339-0000			866	Johnson	29	14	22 E	NE	SW	5W	NW	3145 5	4775 E	OIL	PR		121434			
RED DRAGON 30		2283-0000	1991		935	Johnson	29	14	22 E	NW	SE	ME	NW	4405 S	3096 €				121434			
RED DRAGON 31		2391-0000	1991		923	Johnson	29	14	22 E	SE	se	NW	MM	3986 S	4040 E	OIL	PR		121434			
RED DRAGON 32		2392-0000	1991		923	Johnson	29	14	22 E	NW	SW	HE	ww	4445 5	3929 E	OIL	PR		121434			
RED DRAGON 34-1		2469-0000	1992		920	Johnson	29	14	22 E		SW	NW	NW	4130 5	4850 E	EOR	A)					
RED DRAGON 35-1		2470-0000	1992		920	Johnson	29	14	22 E	SE	NW	SW	NW	3576 S	4834 E	EOR	AL					
RED DRAGON 36-1		2557-0000	1993		900	Johnson .	29	14	22 E	514	SW	NE	NW.	4260 S	3760 E	EOR	AI					
RED DRAGON 37-1		2562-0000	1993		910	Johnson	29	14	22 E		SW	NE	NW	4270 S	3320 €	EOR	AI.					
RED DRAGON 36-1		22605-0000	1994		910	Johnson	29	14	22 E	WW	NE	SE	MAG	3820 S	3260 €	EOR	AL					
RED DRAGON 39-1		22606-0000	1994		900	Johnson	29	14	22 E	NE	tiw	S€	NW	3820 5	3320 E	EOR	AL					
RED DRAGON 4		21384-0000			869	3ohnson	29	14	22 E	NW	NW	S₩	NW	1475 N	165 W	OİL.	PR		121434			
RED DRAGON 40-1		22623-0000	1995		910	Johnson	29	14	22 €	sw	5E	N/Y	NW	4150 S	4500 E	EOR	Al					
RED DRAGON 41-1		22638-0000	1995		903	Johnson	29	14	22 E	SE	56	NW	MW	4230 S	4180 E	EOR	ΑI					
RED DRAGON 42-1		22607-0000	1994		915	lohnson	29	24	22 E	NW	NE	SW	NW	3645 S	4380 E	EOR	AI.					
RED DRAGON. 43-1		22645-0000	1995		910	Johnson	29	14	22 E	SE	NE	SW	NW	3550 S	3975 E	€OR	AL		121434			
RED DRAGON 44	15-091-7	22637-0000	1995		900	Johnson	29	14	22 E	WW	SE	NW	MA	4420 5	4320 E	OIL	PR PC		121434			
RED DRAGON 45		22624-0000	1995		900	Johnson	29	14	22 F	sw	SE	ĦW	NW	460C 5	4320 E	OIL			121434			
RED DRAGON 46	15-091-	22709-0000	1996		910	Johnson	29	14	22 E	NW	NE	1974	NW	512C S	4320 €	OIL	PR		121434			
RED DRAGON 47		22712-0000	1996		910	Johnson	29	14	22 E	NE	ĦE	NW	ЮW	5126 S	3976 E	OIL	PR		121434			
RED DRAGON 45		22728-0001	1996		900	Johnson	29	14	22 E	NE	NW	NE	NW	5115 S	3465 E	OIL	PR		121434			
RED DRAGON 49	15-091-	22692-0000	1996		900	Johnson	29	14	22 E	SW	NE	WW	NW.	4785 S	4320 E	GIL	PR PR		121434			
RED DRAGON 5		21385-0000			871	Johnson	29	14	22 E	NW	SW	NW.	MA	815 N	165 W	OIL			121434			
RED DRAGON 50	15-091-	22683-0000	1996		900	Johnson	29	14	22 E	SE	NE	NW	NW	4785 5	3970 E	OIL	PR PR		121434			
RED DRAGON 51		22729-0000	1996		910	Johnson	29	14	22 E	SE	NW	NE	ИW	4785 S	3465 E	OIL			122434			
RED DRAGON 52-	15-091-	22710-0000	1996		916	Johnson	29	14	22 E	NW	NE	NW	MM	4950 5	450G E	EOR	ΑĪ					
RED DRAGON 53-		22711-0000	1996		900	Johnson	29	14	22 E	NE	NE	NW	NW	4950 5	4180 E	EOR	AJ					
REC DRAGON 54-		22735-0000	1996		900	Johnson	29	14	22 E		NW	NE	NW	4950 S	3720 €	EOR	Až Aī					
RED DRAGON 55-		22693-0000	1996		92G	Johnson	29	14	22 E			NW	WW	4535 S	451G E	EOR						
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RED DRAGON 57-		22734-0000	1996		900	Johnson	29	14	22 E		NW	SE	NW	3760 S	3720 E	EOR	PR		121434			
RED DRAGON 58		22714-0000	1996		880	Johnson	25	14	22 E		E2	МE	WA	4260 5	2805 E	OIL	PR		121434			
RED DRAGON 59		22715-0000	1996		900	Johnson	29	14	22 €	HE	NE	SE	NW	382C S	2805 E		PR		121434			
RED DRAGON 6		21431-0002			858	Johnson	29	14	22 E		NW	SW	NW	3475 5	5115 E	OIL	AI:		121434			
RED DRAGON 60-	15-091-	22682-0000	1996		920	Johnson	29	14	22 E		SE	5W	WW	305G S	4125 E	EOR			121424			
RED DRAGON 61		23436-0000	2010		900	Johnson	29	14	22 E	NE	MVV	sw	NW	3650 5	4640 E	OIL	PŘ Al		121434			
RED DRAGON 62-		23437-0000	2010		902	Johnson	29	14	22 E	NE	5W	SW	NW	3283 S	4833 E	EOR			131434			
RED DRAGON 7		21472-0000			946	Johnson	29	14	22 E	NW	NA.	NW	ĦW	5115 5	5115 E	OIL	PR		121434			
RED DRAGON 8		21525-0000			920	Johnson	29	14	22 €	92	52	SW	NM	2805 S	4620 E	OIL	PR.		121434			
RED DRAGON 9		21526-0000			920	Johnson	29	14	22 E	ŞE	SE	sw	NW	2805 5	4125 E	OIL	PR.		121434			
RED DRAGON WA		21978-0000	1988		1246	Johnson	29	14	22 E	SW	SW	S₩	NW	2759 S	5045 E	عبو _	X	and a contract	121434			and a construction of
The protection with				100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			A D · March College									WATE	e.					
Se f																						

KCC WICHITA FEB 0 3 2016 RECEIVED

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

RECEIVED

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

ADEDATAD. Licanos # 33203	Well Location:
OPERATOR: License # 35289 Name: DRAGONSLAYER, LLC	
Name:	County: JOHNSON
Address 2:	Lease Name: was RED DRAGON OIL now DRAGONSLAYER, LLC Well #: 61
City: OLATHE State: KS Zip: 66061 + 7554	
Contact Person:	NW1/4 OF SECTION 29, TWP14S, RANGE22E,
Phone: () Fax: ()	JOHNSON COUNTY, KS
Email Address:	
Surface Owner Information:	
Name: DRAGONSLAYER, LLC	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1: 25975 W 143RD PL	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.
the KCC with a plat showing the predicted locations of lease roads,	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the pla ed on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads,	tank batteries, pipelines, and electrical lines. The locations shown on the pla
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will.	tank batteries, pipelines, and electrical lines. The locations shown on the placed on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted be expected by the surface of located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this
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If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered Select one of the following: 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 filling in connection with this form; 2) if the form; and 3) my operator name, address, phone number, fall I have not provided this information to the surface owner(s) KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addithat I am being charged a \$30.00 handling fee, payable to the surface of the second option, submit payment of the \$30.00 handling fee.	tank batteries, pipelines, and electrical lines. The locations shown on the placed on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted be elected. I) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm being filed is a Form C-1 or Form CB-1, the plat(s) required by this ix, and email address. I acknowledge that, because I have not provided this information, the electric 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 the KCC, which is enclosed with this form.
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DRAGONSLAYER, LLC 25975 W 143RD PL OLATHE, KS 66061-7554 judiemusgrave@hotmail.com 817-300-7034

FEBRUARY, 1, 2016

KANSAS CORPORATION COMMISSION CONSERVATION DIVISION 266 N MAIN ST, STE, 220 WICHITA, KS 67203-1513

34262

RE: Lease Name Change

Dear Sir or Ma'am:

This letter is to request a change of name for the Lease formerly known as RED DRAGON OIL, part of NW1/4, Sec. 29, Twp14, Range22E, Johnson County, KS. We have applied for and received a new operator's license in the name, DRAGONSLAYER, LLC (license # 35289), and DRAGONSLAYER, LLC is also the mineral rights and surface owner of the property. We would like the Lease name to also be DRAGONSLAYER, LLC.

I have transmitted to your office the form T-1, Request for Change of Operator. Please change the Lease Name for all future reporting to DRAGONSLAYER, LLC.

Thank you for your help. Please contact me if you need anything further to make this change.

Very truly yours,

Judith L Musgrave, Managing Member

aidithes Augrane

Dragonslayer, LLC

FEB 03 2000 RECEIVED

Form T-1 July 2014 Form must be Typed Form must be Signed All blanks must be Filled

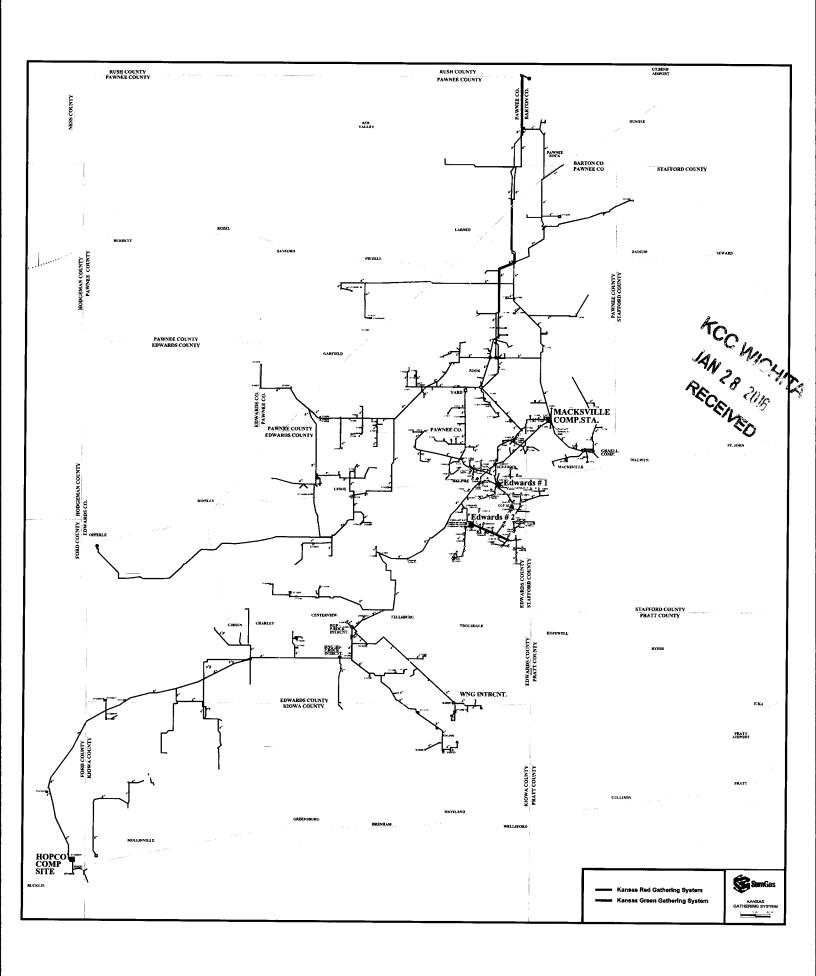
REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE PIT PERMIT Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,

MUST be submitted with this form. Check Applicable Boxes: Effective Date of Transfer: 12/1/2015 Oil Lease: No. of Oil Wells ____ Gas Lease: No. of Gas Wells /8/ KS Dept of Revenue Lease No.: SemGas Gathering Gas Gathering System:___ Lease Name: SemGas Gathering LLC Saltwater Disposal Well - Permit No.: ___ Spot Location: __ feet from N / S Line +0 28 21 feet from | E / | W Line Enhanced Recovery Project Permit No.: ___ County: Rush, Barton, Stafford, Pawnee,Edwards,Kiowa,Ford Entire Project: Yes No Number of Injection Wells ____ Production Zone(s):_ Field Name: _ Injection Zone(s):____ ** Side Two Must Be Completed. Surface Pit Permit No.: _ _ feet from N / S Line of Section (API No. if Drill Pit, WO or Haul) E / W Line of Section feet from Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling Contact Person: Karol Augustine Past Operator's License No. 33647 Past Operator's Name & Address: SemGas Phone: 918-524-8374 6210 S Yale Ave., suite 700, Tulsa OK 74136 Title: Wayne Ziegler, Vice President Signature: . Contact Person: Traci Sunstrum New Operator's License No. ___ Phone: 972-960-3210 New Operator's Name & Address: _IACX Gathering LLC 5400 LBJ Fwv., suite 460, Dallas, TX 75240 Oil / Gas Purchaser: Title: Cody Compton, CFO Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #_ 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 the new operator of the above named lease containing the surface pit ______ . Recommended action: permitted by No.: ____ Authorized Signature Authorized Signature DISTRICT PRODUCTION _ UIC_ Mail to: Past Operator _ New Operator_ District ___

Must Be Filed For All Wells

Lease Name: _	SemGas Gathering LLC		* Location:		
Well No.	API No. (YR DRLD/PRE '67)	Footage from Secti (i.e. FSL = Feet from S		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
		Circle FSL/FNL	Circle FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
					KCC
					IAN 2 VICHITA
					KCC WICHITA IAN 28 2016 RECEIVED
					ED
		FSL/FNL			
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	•	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		F\$L/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
, , p		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

^{*} 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.



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

Check Applicable Boxes:	1			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:			
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.:			
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from L E / W Line	Legal Description of Lease: SW/4 SW/4			
Enhanced Recovery Project Permit No.:	Ko-			
Entire Project: Yes No	County: Kiowa			
Number of Injection Wells **	Production Zone(s): Viola Limestone			
Field Name:	Injection Zone(s):			
** Side Two Must Be Completed.	County: Kiowa Production Zone(s): Viola Limestone Injection Zone(s): RECEIVED			
Surface Pit Permit No.:	feet from N / S Line of Section			
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling			
Past Operator's License No. 34347	Contact Person:			
Past Operator's Name & Address: Benchmark Energy LLC	Phone: 316-617-1147			
PO Box 8747 Pratt KS 67124	Date: 1/26/16			
Title: Manager	Signeture:			
Tius.	Signature			
New Operator's License No. 31629	Contact Person: Jerry Nash			
	Phone: 316-617-1147			
New Operator's Name & Address: Nash Oil & Gas Inc PO Box 8747 Pratt KS 67124				
FO BOX 0747 FIRM NO 07124	Oil / Gas Purchaser: Kansas Gas Services			
	Date:			
Title: President	Signature: / a			
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been			
(Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the				
	—			
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.:			
remiliano necommended action:	permitted by No			
Date	Date:			
Date:	Date:			
DISTRICT EPR	PRODUCTION UIC UIC			
Mail to: Past Operator New Operator				

Must Be Filed For All Wells

	No.: 204772					W/4 SW/4 17-28-16W	
* Lease Name:	GC Bernger	* Location:SW/4 SW/4 17-28-16W					
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	15-907-00027	330	Circle FSUFNL	330	Circle FEL/FWL	Gas	Prod
			_FSL/FNL		_FEL/FWL		<u> </u>
			_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		
					_ FEL/FWL		KCC MICHITA RECEIVED
			_FSL/FNL		FEL/FWL		JAN 2 SHIT
							RECEIVED
							CEIVED
					FEL/FWL		
			_ FSL/FNL		_ FEL/F WL		
			_FSL/FNL		FEL/FWL		
	· ·		_FSL/FNL		FEL/FWL		
			_FSL/FNL		FEL/FWL		
			_FSL/FNL		FEL/FWL		
			_FSL/FNL	-	FEL/FWL		
			_FSL/FNL		FEL/FWL		

^{*} 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.

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

Select the corresponding form being filed: C-1 (Intent) CB-1 (C	Cathodic Protection Borehole Intent)			
OPERATOR: License # 31629	Well Location:			
Name: Nash Oil & Gas Inc	sw/4 sw/4 - Sec. 17 Twp. 28 s. R. 16 ☐ East 🗷 West			
Address 1: PO Box 8747	County: Kiowa			
Address 2:	Lease Name: GC Bergner Well #: 1			
City: Pratt State: KS Zip: 67124 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of			
Contact Person: Jerry Nash	the lease below:			
Contact Person: Jerry Nash Phone: (316) 617-1147 Fax: (620) 672-5280 Email Address: Iferrell@profsecservices.com	KCC WICHITA			
Email Address: Iferrell@profsecservices.com	IAN 20			
	KCC WICHITA JAN 28 2016			
Surface Owner Information:	RECEIVED			
Name: Mary Frances Bergner, Trustee	When filing a Form T-1 involving multiple surface owners, attach an additional			
Address 1. John Charles Bergner Marital Trust	sheet listing all of the information to the left for each surface owner. Surface			
Address 1: John Charles Bergner Marital Trust Address 2: 307 N Ninnescah Street City: Pratt State: KS Zip: 67124 +	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.			
City: Pratt State: KS 7io: 67124	, , , ,			
	s batteries, pipelines, and electrical lines. The locations shown on the plat In the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ceing filed is a Form C-1 or Form CB-1, the plat(s) required by this			
KCC will be required to send this information to the surface ow	cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form.			
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.			
I hereby certify that the statements made herein are true and correct to	the hest at my knowledge and helief			
Thereby Certify that the statements made herein are true and content to	President			
Date: //26/16 Signature of Operator or Agents	Title:			
/ J'	i .			

Kansas Corporation Commission Oil & Gas Conservation Division

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

Спеск Арріісавіе вохеѕ.	Effective Date of Transfer: July 1 2002
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:
XX Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.:
Gas Gathering System:	Lease Name: Hathaway
Saltwater Disposal Well - Permit No.:	N/2 NW NW Sec. 34 Twp. R. EX W
Spot Location: feet from N / S Line	NW/4 34-19s-10w
feet from E / W Line	Legal Description of Lease: NW/4 34-19s-10w
Enhanced Recovery Project Permit No.:	KOO
Entire Project: Yes X No	Rice ACC WICHT
Number of Injection Wells**	Winfield JAN 20
Chase-Silica	none
** Side Two Must Be Completed.	Injection Zone(s): RECEIVED
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section
	feet fromE /W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
Past Operator's License No. 32081 expired	Contact Person: George Saling
Past Operator's Name & Address: Smokey Valley Resour	
212 E Sunderland Chase ks 67524	7-1-2002
Pres.	see assignment of lease
Title:	Signature:
20006	John Thomas
New Operator's License No.	Contact Person:
Vamco Operations New Operator's Name & Address:	620-793-2604 Phone:
265 ave K Chase ks 67524	Oil/Gas Purchaser: American Energies
203 400 1	7-1-2002
	Date:
Title:	Signature: John Thomas
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been
	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the	
Commission records only and does not convey any ownership interest in the	above injection wents) 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 pi
Permit No.: Recommended action:	permitted by No.:
Date:	Date:
Authorized Signature	Authorized Signature
DISTRICT EPR	PRODUCTION UIC
Mail to: Past Operator New Operat	tor District

Must Be Filed For All Wells

KDOR Lease N	1036878783				
* Lease Name:	Hath a way		* Location:	N/2 NW NW T19s	R10W Sec 34
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section (i.e. FSL = Feet from Sou		Type of Well (Oil/Ges/INJ/WSW)	Well Status (PROD/TA'D/Abandoned) XX
1	15-159-01451-000	1 FSL)FNL 4950	Circle FEL FWL	4620	
		FSL/FNL	FEL/FWL		
	· · · · · · · · · · · · · · · · · · ·	FSL/FNL	FEL/FWL		
			FEI /FWI		
		FOL /FNI			
	· · · · · · · · · · · · · · · · · · ·				KOO.
		FSL/FNL	FEL/FWL		NCC WICHITA
		FSL/FNL	FEL/FWL		KCC WICHITA
-	·····	FSL/FNL	FEL/FWL		RECEIVED
		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		. •
		FSL/FNL			
		FSL/FNL			
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		·
		FSL/FNL	FEL/FWL		

^{*} 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.

ASSIGNMENT OF OIL AND GAS LEASES

KNOW ALL MEN BY THESE PRESENTS:

That, the undersigned, George Saling, hereinafter called "ASSIGNOR", for and in consideration of Ten Dollars (\$10.00), cash in hand paid and other good and valuable consideration, the receipt whereof is hereby acknowledged, does hereby sell, assign, transfer, and set over unto John Thomas, dba Vamco Operating, hereinafter called "ASSIGNEE", its entire working interest, subject to any and all overriding royalty interest of record, in and to the following oil and gas lease(s), insofar as said lease covers the following described land in Rice County, Kansas:

The Northwest Quarter (NW4) of Section 34, Township 19S, Range 10W. Known as the Hathaway Lease in Rice County, Kansas, also see "Exhibit A";

together with the rights incident thereto, the personal property thereon, appurtenant thereto or used or obtained in connection therewith:

And for the same consideration, the Assignor covenants with the Assignee, its heirs, successors or assigns: That the Assignor is the lawful owner of and has good title to the interest above assigned in and to said lease, estate, rights and property, free and clear from all liens, encumbrances or adverse claims; That said lease is a valid and subsisting lease on the land above described, and all rentals and royalties due thereunder have been paid and all conditions necessary to keep the same in full force have been duly performed.

This Assignment is made without covenants of warranty of title, either expressed or implied, but is made with full substitution and subrogation of Assignees in and to all covenants and warranties by others heretofore given or made in respect to the interests assigned herein.

EXECUTED This 5th day of July, 2002, and to be effective for all purposes as of July 1, 2002. This instrument was acknowledged before me on this 8th day of July, 2002, by: KCC WICHITA JAN 28 2016 RECEIVED Juny Sel

Document #: 200401397 STATE OF KANSAS ()

This Instrument was filed on: 5/26/2004 At: 8:00:00 AM and duly recorded in

Book: Oil & Gas 137 Page: 112 Fees: \$12

Rice Co., Register of Deeds

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

OPERATOR: License #	
265 Ave K	Rice Sec. Iwp. S. H. East West
Address 1: 200 Ave R	11 - b 1
City: Chase State: KS Zip: 67524 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: John Thomas	the lease below:
Phone: (620) 793 2604 Fax: ()	LOO AALC TILING
Email Address:	JAN 2 8 2016
	RECEIVED
Surface Owner Information: Hathaway Family Trust	
Name: 422 Ave L Address 1:	When filing a Form T-1 involving multiple surface owners, attach an additional
Address 1:	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: KS 67524	county, and in the real estate property tax records of the county treasurer.
City: State: Zip:+	-
are premimary 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:	
XXI certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.
XXI 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 forr form; and 3) my operator name, address, phone number, fax. I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface.	e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form to being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this as of the surface owner by filling out the top section of this form and
 XII 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 forr form; and 3) my operator name, address, phone number, fax. I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addret that I am being charged a \$30.00 handling fee, payable to the 	e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form in being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ss of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form. In gree with this form. If the fee is not received with this form, the KSONA-1
 XII 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 forr form; and 3) my operator name, address, phone number, fax. I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addret that I am being charged a \$30.00 handling fee, payable to the lift choosing the second option, submit payment of the \$30.00 handling 	e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form in being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this so of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.
XXI 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 forr form; and 3) my operator name, address, phone number, fax. I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addre that I am being charged a \$30.00 handling fee, payable to the lift choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CB-1.	e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form in being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this se of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.

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,

Check Applicable Boxes:	ttea with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: January 1, 2016			
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 145955			
Gas Gathering System:	Lease Name: Busenitz			
Saltwater Disposal Well - Permit No.:	NV NW SE NW _{sec.} 24 _{Twp.} 24 _{R.} 4 ✓ E W			
Spot Location: 1632 feet from ✓ N / S Line	SW/4 & N/2 24-24-4E			
1564 feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	KCC 160			
Entire Project: Yes No	BUTLER County: BUTLER Production Zone(s): 2620 AN 28 2016			
Number of Injection Wells **				
Field Name:	Injection Zone(s):			
** Side Two Must Be Completed.	"JOSES ESTO(S)			
Surface Pit Permit No.:	feet from N / S Line of Section			
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling			
	Jay Ablah			
Past Operator's License No.	Contact Person:			
Past Operator's Name & Address: Noble Petroleum, Inc.	Phone: 316-636-5155			
8918 W 21st St N., #200-304 Wichita, KS 6720!	1/1/2016 /			
President President	Signature: Jest Dehlen			
	Olgradus.			
New Operator's License No.	Contact Person: Tim Gulick			
C & G DRILLING COMP	600 502 5210			
New Operator's Name & Address:	Pnone:			
	Oil / Gas Purchaser: Coffeyville			
	Date: 1-1-2016			
Title: Pres,	Signature:			
Asknowledgment of Transfers. The above request feet transfers of injection	authorization, surface pit permit # has been			
	Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the				
	above injection weri(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:			
Date:	Authorized Signature			
	PRODUCTIONUIC			
Mail to: Past Operator New Operato	or District			

Side I wo

Must Be Filed For All Wells

145955 KDOR Lease No.: 24-24-4E Busenitz * Lease Name: * Location: Type of Well (Oil/Gas/INJ/WSW) Footage from Section Line Well Status Well No. API No. (YR DRLD/PRE '67) (i.e. FSL = Feet from South Line) (PROD/TA'D/Abandoned) Circle Circle **PROD** 1632 15-015-24044-0000 1564 OIL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FSL/FNL FEL/FWL **FSL/FNL** FEL/FWL FSL/FNL FEL/FWL FEL/FWL FSL/FNL

A separate sheet may be attached if necessary

FSL/FNL

FEL/FWL

^{*} 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

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

OPERATOR: License # 32701	Well Location:				
Name: C & G Drilling Company	NW NW SE NW Sec. 24 Twp. 24 S. R. 4 X East West				
Address 1: 701 E River	County: Butler				
Address 2	Lease Name: Busenitz Well #. 1				
City: Eureka State: KS Zip: 67045 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of				
Contact Person: Tim Gulick	the lease below: SW/4 & N/2 Sec. 24-24-4E KCC WICHITA				
Contact Person: Tim Gulick Phone: (620) 583 Fax: (5318)					
Email Address:	- JAN 28 2016				
Surface Owner Information:	RECEIVED				
Name: William L. Busenitz					
Address 1: 8831 NW Hopkins Switch Road	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: Potwin State: KS Zip: 67123 +					
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Ca	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered. Select one of the following:	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.				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will lead to the subject well in the subject well is or will lead to the subject well in	tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. 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 being filed is a Form C-1 or Form CB-1, the plat(s) required by this				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered. Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will I CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, father than the surface owner(s). I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface.	tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Dee 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 being filed is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address. I acknowledge that, because I have not provided this information, the electric 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				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered. Select one of the following: 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; and 3) my operator name, address, phone number, factorized the connection to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addit that I am being charged a \$30.00 handling fee, payable to the surface of the sur	tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Dee 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. I acknowledge that, because I have not provided this information, the electron of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered. Select one of the following: 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; and 3) my operator name, address, phone number, factorized the connection with the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addit that I am being charged a \$30.00 handling fee, payable to the choosing the second option, submit payment of the \$30.00 handling fee.	tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Dee 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. I acknowledge that, because I have not provided this information, the electron of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form. Illing fee with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned.				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathe KCC with a plat showing the predicted locations of lease roads, are preliminary non-binding estimates. The locations may be entered. Select one of the following: 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; and 3) my operator name, address, phone number, factorized the connection of the surface owner(s) kCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addit that I am being charged a \$30.00 handling fee, payable to the surface owner (s). If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form form and the second option.	tank batteries, pipelines, and electrical lines. The locations shown on the plated on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. Dee 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. I acknowledge that, because I have not provided this information, the electron of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form. Illing fee with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned.				

Kansas Corporation Commission Oil & Gas Conservation Division

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,
MIST he submitted with this form

Check Applicable Boxes: MUST be submit	tted with this form.	
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:	bruary 1, 2016
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 129113	, ,
Gas Gathering System:	Lease Name: UNG UNIT	
Saltwater Disposal Well - Permit No.:		
Spot Location: feet from N / S Line	SecTwp	
feet from E / W Line	Legal Description of Lease: SE OF 26, SW OF 25	5, E/2 OF 35, W/2 NE
Enhanced Recovery Project Permit No.: £25518	OF 36, ALL IN 2S-30W	
Entire Project: Yes No	County: DECATUR	
Number of Injection Wells **	Production Zone(s): LKC A,B,C,D	
Field Name: Ung	Injection Zone(s): LKC A, C, D	
** Side Two Must Be Completed.	Injection Zone(s): LNC A, C, D	
Surface Pit Permit No.:	feet from \[\bigcap \text{N / \Bigcap S Line}	of Section
(API No. if Drill Pit, WO or Haul)		of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling	of Section
Past Operator's License No	Contact Person: Leon Kodak	
Past Operator's Name & Address:MURFIN DRILLING COMPANY INC	Phone: 316-267-3241	MACA COLOR OF THE
250 N. WATER ST., STE 300 WICHITA, KS 67202	Date:)/2//2016	
Title: VP Production	Signature:	
	Signature.	
New Operator's License No.	Contact Person: DICK SCHREMMER	FEB 02 20%
New Operator's Name & Address: BEAR PETROLEUM LLC	Phone: 316-524-1225	O WCHO
P.O. BOX 438 HAYSVILLE, KS 67060-0438	Oil / Gas Purchaser:	FEB D 2 2000
The state of the s	Date: 2-1-10	RECEIVED
DDESIDENT		CEIVED
Title: PRESIDENT	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 a	above injection well(s) or pit permit.	
	T	
is acknowledged as	Marie Land	is acknowledged as
the new operator and may continue to inject fluids as authorized by	the new operator of the above named lease cor	ntaining the surface pit
Permit No.: Recommended action:	permitted by No.:	
	. ,	
Date:	Date:	
Authorized Signature	Authorized	Signature
DISTRICT EPR F	PRODUCTION	
Mail to: Past Operator New Operato	or District	į.

Must Be Filed For All Wells

Lease Name	KDOR Lease	No.:				
(VR DRLD)PRE 97) (i.e. FSL = Feet from South Line) (ONGAS/INAWSW) (PRODITA DIABANDONE) 1-1	* Lease Name:	UNG UNIT		* Location: SE	E OF 26,SW OF 25,E/2 OF 3	35, W/2 NE OF 36 ALL IN 2S-30W
1-2	Well No.					Well Status (PROD/TA'D/Abandoned)
2-1 15-039-20664 660 @Fril 660 @Fril 0i PROD 3- 15-039-20599 636 @Fril 2127 @Fril Iaj Ta'D 5-2 15-039-20578 2200 FSIEN 1690 FELEW WSW TA'D 5-3 15-039-20528 1210 FSIEN 2135 FELEW 0i TA'D 6-1 15-039-20453 4726 @Fril 2086 @Fril 0i TA'D FSIFIL FELFWL FELFWL FELFWL FSIFIL FELFWL FSIFIL FELFWL FELFWL FSIFIL FELFWL FELFWL FSIFIL FELFWL FELFWL FSIFIL FELFWL FELFWL FSIFIL FSIFIL	1-1	15-039-20576	330 Circle	4290 FEDFWL	Oil	<u>PROD</u>
3-	1-2	15-039-20707	330 FSDFNL	3300 FEDFWL	Inj	
5-2	2-1	15-039-20664	660 FSDFNL	660 FEDFWL	Oil	PR O D
5-3 15-039-20528 1210 FSUFFIL 2135 FELFWIL Oil TA'D 6-1 15-039-20453 4726 EDFNIL 2086 EDFWIL Oil TA'D FSUFNIL FEUFWIL	3-1	15-039-20599	636 FSDFNL	2127 FEDFWL	Inj	TA'D
6-1 15-039-20453	5-2	15-039-20578	2200 FSLFN	/690 FELEW	WSW	TA'D
FSUFNL FEUFWL FSUFNL F	5-3	15-039-20528	1210 FSLEND	2135 FELEW	<i>Oi</i> /	TA'D
FSL/FNL FEL/FWL	6-1	15-039-20453	4726 FSDFNL	2086 EDFWL	0;1	TA'D
FSL/FNL FEL/FWL		·	FSL/FNL	FEL/FWL		_
FSL/FNL FEL/FWL		**************************************	FSL/FNL	FEL/FWL		
FSL/FNL FEL/FWL FEL/FWL FSL/FNL FSL/FNL FEL/FWL FSL/FNL FSL/FNL FEL/FWL FSL/FNL FSL/FNL FSL/FNL FSL/FNL FSL/FNL FSL/FWL FSL/FNL FSL/FNL FSL/FWL FSL/FWL FSL/FWL FSL/FWL FSL/FWL FSL/FNL FSL/FWL FSL/			FSL/FNL	FEL/FWL		
FSL/FNL FEL/FWL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL		**************************************	FSL/FNL	FEL/FWL	A IN A A A A A A A A A A A A A A A A A A	_
FSL/FNL FEL/FWL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL	vivi i - akrillisi - akrillisi - akrillisi - akrillisi		FSL/FNL	FEL/FWL	A	CC hare
FSUFNL			FSL/FNL	FEL/FWL		EB 117 CHITA
FSL/FNL FEL/FWL			FSL/FNL	FEL/FWL		RECENTED TO SECOND
	A ATTION OF THE PARTY OF THE PA		FSL/FNL	FEL/FWL		- COLIVED
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL	wyklast 1895 – North Common	
			FSL/FNL	FEL/FWL		
FSL/FNL	·		FSL/FNL	FEL/FWL		
FSL/FNLFEL/FWL	· B. ()		FSL/FNL	FEL/FWL		
FSL/FNLFEL/FWL			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
		***	FSL/FNL	FEL/FWL		_
			FSL/FNL	FEL/FWL		

^{*} 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.

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

OPERATOR: License # 30606	Mell Leastion
OPERATOR: License # 30606 Name: MURFIN DRILLING COMPANY INC	Well Location:
Address 1: 250 N. WATER ST., STE 300	County, DECATUR
Address 2:	Lease Name: UNG UNIT Well #:
City: WICHITA State: KS Zip: 67202 + 3018	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Contact Person:	KCC WICHITA
Email Address:	FEB 0 2 2016
Surface Owner Information:	RECEIVED
Name: See Attached	
Address 1:	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: State: Zip:+	
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cath	odic Protection Borehole Intent), you must supply the surface owners and
the KCC with a plat showing the predicted locations of lease roads, ta	odic Protection Borehole Intent), you must supply the surface owners and nk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
the KCC with a plat showing the predicted locations of lease roads, ta are preliminary non-binding estimates. The locations may be entered Select one of the following: 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 form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). I	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the
the KCC with a plat showing the predicted locations of lease roads, ta are preliminary non-binding estimates. The locations may be entered Select one of the following: 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 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	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this as of the surface owner by filling out the top section of this form and
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- 1. STALLMAN TIMOTHY F 402 N SUNRISE APT 2D OBERLIN, KS 67749
- 2. M&E LAND LLC 715 W ASH #109 OBERLIN, KS 67749
- 3. GOSS, JIMMY 2606 400TH RD OBERLIN, KS 67749
- 4. DUPREE. TULLY & THERESA 7070 W CUSTER AVE LAKEWOOD, CO 80226
- 5. BADSKY. KENT & JANET M 1850 500TH RD OBERLIN, KS 67749
- 6. WILSON BROTHERS LLC 506 S RAMSEY LITCHFIELD, MN 55355

KCC WICHITA FEB 0 2 2016 RECEIVED

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.

Mail to: Past Operator New Operator	
Authorized Signature	Authorized Signature PRODUCTION UIC
Date:	Date:
the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action:	the new operator of the above named lease containing the surface pit permitted by No.:
is acknowledged as	is acknowledged as
Acknowledgment of Transfer: The above request for transfer of injection a noted, approved and duly recorded in the records of the Kansas Corporation (Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Title: operator	Signature: Sward A Line
67352	Oil / Gas Purchaser: Pacer Date: 1-29-2016
New Operator's License No. 33761 New Operator's Name & Address: K&A Oil, PO Box 4, Longton, KS	Contact Person: Bud Kill Phone: (620)642-7005
Title: operator	Signature:
Moline, KS 67353	Date: 1-29-2016
Past Operator's Name & Address: B&H Drilling, 1227 Trail Road	Phone: (316) 737-1471
Past Operator's License No. 32526	Contact Person: Brad Linder
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
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
** Side Two Must Be Completed.	County: Elk Production Zone(s): Layton Injection Zone(s): Layton RECEIVED
Field Name:	Production Zone(s): Layton Injection Zone(s): Layton
Entire Project: Yes No	County: Elk
Enhanced Recovery Project Permit No.:	NANO SO SPILL
1400 feet from E / W Line	Legal Description of Lease: WY 4 0 524, 172 0 524, 572 0 1124
Spot Location: 1300 feet from N / S Line	Legal Description of Lease: SW/4 of SE4, N/2 of SE/4, S/2 of NE/4
Saltwater Disposal Well - Permit No.: E26475 plugsed	
Gas Gathering System:	Lease Name: Freeman
Gas Lease: No. of Gas Wells ***	KS Dept of Revenue Lease No.: 117833
Check Applicable Boxes: Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 1-29-2016

Must Be Filed For All Wells

KDOR Lease	No.: 117833			
* Lease Name:	Freeman	* Location:	Sec. 17, Twp 31S, 12	E
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)
Fred 1	15-049-20168	5085 Circle 10 Circle 472 FEDFV	vL Oil	IN 20-31-1
1A	15-049-20417	277 (S)FNL 5256 (EDFV	_{vL} Oil	IN
3A	15-049-20425	820 (SI) FNL 1207 (FED EV	_{vL} Oil	<u>IN</u>
5A	15-049-20427	695 FEDFNL 405 FEDFV	vl Oil	IN
		FSL/FNLFEL/FV	YL	
		FSL/FNLFEL/FV	VL	
		FSL/FNL FEL/FV	VL	
		FSL/FNLFEL/FV	VL	
		FSL/FNLFEL/FV	VL	
		FEL/FV FEL/FV	VL	A
		FSL/FNLFEL/FV	VL	FEB 0 2 2016
		FSL/FNLFEL/FV	VL	FEB 0 2 2016
		FSL/FNL FEL/FV	VL	RECEIVED
10° °°° Abridaha samatan tangga samatan tangga		FSL/FNL FEL/FV	VL	
		FSL/FNL FEL/FV	VL	
		FSL/FNLFEL/FV	VL	
		FSL/FNLFEL/FV	VL	
		FSUFNL FEUFV	VL	
		FSL/FNLFEL/FV	VL	44
		FSL/FNLFEL/FV	VL	
***************************************		FSL/FNLFEL/FV	VL	***************************************
		FSL/FNL FEL/FV	VL	
		FSL/FNLFEL/FV	VL	
		FSL/FNLFEL/FV	VL	

^{*} 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.

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

	Well Location: /20	
Name: K&A Oil	Well Location:	. R. 12 X East West
Address 1: PO Box 4	County: EIK	
Address 2:	Lease Name: Freeman	Well #:
City: Longton State: KS Zip: 67352 +	If filing a Form T-1 for multiple wells on a leas	e, enter the legal description of
Contact Person: Bud Kill	the lease below:	of NE/4
Phone: (620) 642-7005 Fax: ()	N2NE - 20-31-126	KCC WICHIT
Email Address.	-	FEB 0 2 2016
Surface Owner Information:		RECEIVED
_{Name:} Ed Markel	When filing a Form T-1 involving multiple surfa	ce owners, attach an additional
Name: Ed Markel Address 1: PO Box 274	sheet listing all of the information to the left for owner information can be found in the records	
Address 2:	county, and in the real estate property tax reco	
City: Pretty Prairie State: KS Zip: 67570 +	_	
the KCC with a plat showing the predicted locations of lease roads, to		
are preliminary non-binding estimates. The locations may be entered Select one of the following: 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 and 3) my operator name, address, phone number, fax	e Act (House Bill 2032), I have provided the fol e located: 1) a copy of the Form C-1, Form CB- m being filed is a Form C-1 or Form CB-1, the p	lowing to the surface
Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	e Act (House Bill 2032), I have provided the foll be located: 1) a copy of the Form C-1, Form CB-1 being filed is a Form C-1 or Form CB-1, the p, and email address. I acknowledge that, because I have not provided owner(s). To mitigate the additional cost of the less of the surface owner by filling out the top se	lowing to the surface 1, Form T-1, or Form lat(s) required by this d this information, the KCC performing this
Select one of the following: 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 form; and 3) my operator name, address, phone number, fax. I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and address.	e Act (House Bill 2032), I have provided the foll be located: 1) a copy of the Form C-1, Form CB-1 being filed is a Form C-1 or Form CB-1, the p, and email address. I acknowledge that, because I have not provided owner(s). To mitigate the additional cost of the ses of the surface owner by filling out the top see KCC, which is enclosed with this form.	lowing to the surface 1, Form T-1, or Form lat(s) required by this d this information, the KCC performing this ction of this form and

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,
MIST be submitted with this form

Check Applicable Boxes:	ted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: <u>/3353/</u>
Gas Gathering System:	Lease Name: B. Acc K
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease: 4 2 500 205. Full
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Wichita Co.
Number of Injection Wells **	Production Zone(s)
Field Name:	
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.: 15 3330195 0000 (API No. if Drill Pit, WO or Haul)	1340 feet from ☐ N / € S Line of Section feet from ☐ E / € W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
Past Operator's License No. 3493	Contact Person: Mark Harth
Past Operator's Name & Address: Mark Heath	Phone: 626 874 500/
1451 5. Co. Rd. 21 Leviks	Date: 125 3 2016
Title: BWAer approxim 67861	Signature: A sike the the
New Operator's License No.	Contact Person: Mark Hearth
New Operator's Name & Address: Plank Hawth	Phone: 620 874 500/
1431 5 C. El 21	Oil / Gas Purchaser: FER 10.2
	Date: Jet 3 2016/ FEB 03 2016
Leot, K5 6286/	Vale: Set 5 XOTO REON
Title: Ganer Oferato	Signature: A CELVED
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # 15 30 33495 000 has been
noted, approved and duly recorded in the records of the Kansas Corporation C	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the a	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
	PRODUCTION UIC
Mail to: Past Operator New Operato	r District

Must Be Filed For All Wells

* Lease Name:		* Location:			
Well No.	API No. (YR DRLD/PRE '67)	Footage from Sect (i.e. FSL = Feet from S		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
1	15203 2421 UD	37. Circle FSLEND 5	Circle FWL	Oil	shot in
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
··· <u>u,</u>		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		_
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		_
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		FSL/FNL			KCC WICHITA
		FSL/FNL			FEB 03 2016
					RECEIVED
		FSL/FNL	FEL/FWL		

^{*} 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.

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

Select the corresponding form being filed: C-1 (Intent) CB-1 (Cat	thodic Protection Borehole Intent) X T-1 (Transfe	er) CP-1 (Plugging Application)
OPERATOR: License #	Well Location: 4 - C \(\) \(Well #:
Phone: (a20) 274500 Fax: () Email Address: Latboy a wbs net : 015	the lease below:	KCC WICHITA FEB 0 3 2016
Surface Owner Information:		RECEIVED
Name: Terri Brack/Daniel & More sharpler Address 1: 1415 5. Co. RD 21/906 Colledge 54 Address 2: Letti KS 6786 Scott City KS City: State: Zip: + 6727/	When filing a Form T-1 involving multiple s sheet listing all of the information to the le owner information can be found in the rec county, and in the real estate property tax	oft for each surface owner. Surface ords of the register of deeds for the
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic 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 the second	atteries, pipelines, and electrical lines. 🧵	The locations shown on the plat
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 loca 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 ing filed is a Form C-1 or Form CB-1, the	CB-1, Form T-1, or Form
□ 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 must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KC	er(s). To mitigate the additional cost of f the surface owner by filling out the top	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	e with this form. If the fee is not receive will be returned.	ed with this form, the KSONA-1
I hereby certify that the statements made herein are true and correct to the Date: 1 3 3016 Signature of Operator or Agent: 1 3 3016		notor

Kansas Corporation Commission Oil & Gas Conservation Division

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,
MIST he submitted with this form.

Check Applicable Boxes:	tteg with this form.			
✓ Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 10/31/2014			
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 15185002780001			
Gas Gathering System:	Lease Name: GILES OWWO NE _ SE _ SE _ Sec, 34 Twp, 24 R, 15 E W			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease: NE NE SE 34-24-15			
Enhanced Recovery Project Permit No.:	County: STAFFORD			
Entire Project: Yes No				
Number of Injection Wells **	Production Zone(s):			
Field Name:	Injection Zone(s):			
Surface Pit Permit No.: 15185002780001	990 feet from N / V S Line of Section			
(API No. if Drill Pit, WO or Haul)	330 feet from ✓ E / W Line of Section			
Type of Pit: Fmergency Burn Settling	Haul-Off Workover Drilling			
Past Operator's License No. 34565	Contact Person: RONALD LANDWEHR 620, 204, 5486 KCC WICH!			
Past Operator's Name & Address: 5R LLC; 10265 SE WALSTEAD	Phone: 020-294-3460			
SHARON, KS 67138	Date: 10/31/2014 FEB 0 3 2(1)			
Title: OWNER	Signature: March & RECEIVED			
	V Gas the			
New Operator's License No. 35/94	Contact Person: JOHN ROYER			
New Operator's Name & Address: JOHN ROYER	Phone: 620-727-3591			
1905 6TH ROAD	Oil / Gas Purchaser: NATIONA COOPERATIVE REFINERY ASSOC			
RAYMOND, KS 67573	Date: 10/31/2014			
OWNED	* Ola Raph			
Title:	Signature: + John Royah			
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit #15185002780001 has been			
	Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the				
	T			
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.:			
Tellin 10.				
Date:	Date:			
Authorized Signature	Authorized Signature			
	PRODUCTION UIC			
Mail to: Past Operator New Opera	tor District			

Must Be Filed For All Wells

KDOR Lease	No.: 15185002780001	<u> </u>			
* Lease Name: GILES OWWO		* Location:	STAFFORD COUNTY		
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
1	15185002780001	990 Circle	330 Circle	OIL	PROD
	-	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		· ·
A-F-A-T-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-A-		FSL/FNL	FEL/FWL		
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And a control of the		FSL/FNL	FEL/F W L		
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		FSL/FNL	FEL/F W L		
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		FSL/FNL	FEL/ FW L		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		ESI /ENI	EEL/EWI		
		FSI /FNI	FFI /FWI		
		FSI /FNI	FEL/FWI	ACC	WICHITA
		ESI /ENI	EEI /EWI	FEB (3 2016
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		, 021,112			
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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

Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)	
OPERATOR: License #35/94	Well Location:
Name: JOHN ROYER	NE_SE_SE_ Sec. 34 Twp. 24 S. R. 15 East West
Name: JOHN ROYER Address 1: 1905 6TH ROAD	
Address 2:	County: STAFFORD Lease Name: GILES OWWO Well #: 1
City: RAYMOND State: KS Zip: 67573 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: JOHN ROYER	the lease below:
Phone: (620) 727-3591 Fax: ()	
Email Address: KSHORSE_MASTER@YAHOO.COM	HITA
Email Address: KSHORSE_MASTER@YAHOO.COM KCC WICHITA	
Surface Course Information: EER N 3 2016	
Name: ALEXANDER & BERNICE GILES TR #1 A01 POCHESTER ST RECEI	VED at a second to the second
Address 1: 401 ROCHESTER ST	VEAEn 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: APT 114	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.
City: PRATT State: KS Zip: 67124 +	county, and in the real estate property tax records of the county treasurer.
State: +	
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathod the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:	batteries, pipelines, and electrical lines. The locations shown on the plat
owner(s) of the land upon which the subject well is or will be loc	et (House Bill 2032), I have provided the following to the surface cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ceing filed is a Form C-1 or Form CB-1, the plat(s) required by this d email address.
I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KC	ner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	ee with this form. If the fee is not received with this form, the KSONA-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 - 31 - 2014 Signature of Operator or Agent: X Shu	OWNER/OPERATOR Title: