

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

010116_Washbon_Unit.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 _____ **
- ☒ Gas Lease: No. of Gas Wells 1 **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Spivey Grabs

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

Effective Date of Transfer: 01/01/2016

KS Dept of Revenue Lease No.: 206773

Lease Name: WASHBON UNIT

C - - E2 - NE Sec. 19 Twp. 31 R. 8 ☐ E ☒ W

Legal Description of Lease: _____

SEC. 19-31S-8W

County: HARPER

Production Zone(s): MISSISSIPPI CHAT

Injection Zone(s): _____

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling

☐ Haul-Off ☐ Workover OR ☐ Drilling

Past Operator's License No. 33999 ✓

Past Operator's Name & Address: LINN OPERATING, INC.
600 TRAVIS STE. 5100, HOUSTON, TEXAS 77002

Title: REGULATORY COMPLIANCE ADVISOR

Contact Person: SHAWN HILDRETH

Phone: 281-840-4234

Date: 12/31/2015

Signature: Shawn Hildreth

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

New Operator's License No. 34357 ✓

New Operator's Name & Address: ATLAS OPERATING LLC
15603 KUYKENDAHL RD. STE. 200, HOUSTON, TEXAS 77090

Title: VICE PRESIDENT

Contact Person: YOUSUF CHAUDHARY

Phone: 281-893-9400

Oil / Gas Purchaser: PIONEER EXPLORATION, LLC

Date: 12/31/2015

Signature: [Signature]

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____
Authorized Signature

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

Date: _____
Authorized Signature

DISTRICT _____ EPR 2-2-16 PRODUCTION 2.3.16 UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form KSONA-1
July 2014

Form Must Be Typed
Form must be Signed
All blanks must be Filled

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 33999
Name: LINN OPERATING, INC.
Address 1: 600 TRAVIS STE. 5100
Address 2: _____
City: HOUSTON State: TX Zip: 77002 + _____
Contact Person: SHAWN HILDRETH
Phone: (281) 840-4234 Fax: (_____) _____
Email Address: shildreth@linnenergy.com

Well Location:
C E2 NE Sec. 19 Twp. 31 S. R. 8 ☐ East ☒ West
County: HARPER
Lease Name: WASHBON UNIT Well #: 2

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

Surface Owner Information:

Name: BILLY LEO SANDERS
Address 1: 316 W 19TH
Address 2: _____
City: HARPER State: KS Zip: 67058 + _____

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.

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KANSAS

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 12/31/2015 Signature of Operator or Agent: Shawn Hildreth Title: REGULATORY COMPLIANCE ADVISOR

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,
MUST be submitted with this form.

Check Applicable Boxes:

- ☒ Oil Lease: No. of Oil Wells 1 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Spivey Grabs**** Side Two Must Be Completed.**Effective Date of Transfer: 01/01/2016KS Dept of Revenue Lease No.: 136521 & 226773Lease Name: WASHBON____ NW - NE - NE Sec. 19 Twp. 31S R. 8 ☐ E ☒ W

Legal Description of Lease: _____

SEC. 19-31S-8WCounty: HARPERProduction Zone(s): MISSISSIPPI CHAT

Injection Zone(s): _____

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

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 SectionType of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover OR ☐ DrillingPast Operator's License No. 33999 ✓Past Operator's Name & Address: LINN OPERATING, INC.
600 TRAVIS STE. 5100, HOUSTON, TEXAS 77002Title: REGULATORY COMPLIANCE ADVISORContact Person: SHAWN HILDRETHPhone: 281-840-4234Date: 12/31/2015Signature: Shawn HildrethNew Operator's License No. 34357 ✓New Operator's Name & Address: ATLAS OPERATING LLC
15603 KUYKENDAHL RD. STE. 200, HOUSTON, TEXAS 77090Title: VICE PRESIDENTContact Person: YOUSUF CHAUDHARYPhone: 281-893-9400Oil / Gas Purchaser: PIONEER EXPLORATION, LLCDate: 12/31/2015Signature: [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
the new operator and may continue to inject fluids as authorized by
Permit No.: _____. Recommended action: _____

Date: _____
Authorized Signature

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

Date: _____
Authorized Signature

DISTRICT _____ EPR 2-2-16 PRODUCTION 2-3-16 UI FEB - 3 2016
Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: WASHBON

* Location: HARPER COUNTY -- SEC. 19-31S-8W

[illegible]

* 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.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 33999
Name: LINN OPERATING, INC.
Address 1: 600 TRAVIS STE. 5100
Address 2: _____
City: HOUSTON State: TX Zip: 77002 + _____
Contact Person: SHAWN HILDRETH
Phone: (281) 840-4234 Fax: (_____) _____
Email Address: shildreth@linnenergy.com

Well Location:
____ NW ____ NE ____ NE Sec. 19 Twp. 31 S. R. 8 ☐ East ☒ West
County: HARPER
Lease Name: WASHBON Well #: 3-19

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

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

Surface Owner Information:

Name: BILLY LEO SANDERS
Address 1: 316 W 19TH
Address 2: _____
City: HARPER State: KS Zip: 67058 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 12/31/2015 Signature of Operator or Agent: Shawn Hildreth Title: REGULATORY COMPLIANCE ADVISOR

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

010116_Banta_E.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 3 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Spivey Grabs

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

Effective Date of Transfer: 01/01/2016

KS Dept of Revenue Lease No.: 106433

Lease Name: BANTA 'E'

_____ - _____ - SW Sec. 34 Twp. 30S R. 8 ☐ E ☒ W

Legal Description of Lease: _____

SW/4

County: KINGMAN

Production Zone(s): MISSISSIPPI CHAT

Injection Zone(s): _____

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover de ☐ Drilling

Past Operator's License No. 33999/

Past Operator's Name & Address: LINN OPERATING, INC.
600 TRAVIS STE. 5100, HOUSTON, TEXAS 77002

Title: REGULATORY COMPLIANCE ADVISOR

Contact Person: SHAWN HILDRETH

Phone: 281-840-4234

Date: 12/31/2015

Signature: Shawn Hildreth

New Operator's License No. 34357 /

New Operator's Name & Address: ATLAS OPERATING LLC
15603 KUYKENDAHL RD. STE. 200, HOUSTON, TEXAS 77090

Title: VICE PRESIDENT

Contact Person: YOUSUF CHAUDHARY

Phone: 281-893-9400

Date: 12/31/2015

Signature: Yousuf Chaudhary

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

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

DISTRICT _____ EPR 2-2-16 PRODUCTION 2.3.16 UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

FEB - 3 2016

* Lease Name: BANTA 'E'

* Location: KINGMAN COUNTY -- SEC. 34-30S-8W

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

* 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

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**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 33999
Name: LINN OPERATING, INC.
Address 1: 600 TRAVIS STE. 5100
Address 2: _____
City: HOUSTON State: TX Zip: 77002 + _____
Contact Person: SHAWN HILDRETH
Phone: (281) 840-4234 Fax: (_____) _____
Email Address: shildreth@linnenergy.com

Well Location:
____ - ____ - ____ SW Sec. 34 Twp. 30 S. R. 8 ☐ East ☒ West
County: KINGMAN
Lease Name: BANTA 'E' Well #: _____
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
SW/4

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

Surface Owner Information:

Name: SEE ATTACHMENT
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

12/31/2015
Date: _____ Signature of Operator or Agent: Shawn Hildreth Title: REGULATORY COMPLIANCE ADVISOR

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: 67025

Owner Name: Freeport State Bank

Address: 807 W 14th

City: Harper

State: KS

Zip: 67058

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

010116_Banta_C.pdf

Form T-1
July 2014

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**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 3 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☐ Saltwater Disposal Well - Permit No.: _____
Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: Spivey Grabs

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

Effective Date of Transfer: 01/01/2016

KS Dept of Revenue Lease No.: 106432

Lease Name: BANTA 'C'

____ - ____ - ____ NE Sec. 4 Twp. 31S R. 8 ☐ E ☒ W

Legal Description of Lease: _____

NE/4

County: HARPER

Production Zone(s): MISSISSIPPI CHAT

Injection Zone(s): _____

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

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.
600 TRAVIS STE. 5100, HOUSTON, TEXAS 77002

Phone: 281-840-4234

Date: 12/31/2015

Title: REGULATORY COMPLIANCE ADVISOR

Signature: Shawn Hildreth

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 77090

Phone: 281-893-9400

Oil / Gas Purchaser: PIONEER EXPLORATION, LLC

Date: 12/31/2015

Title: VICE PRESIDENT

Signature: [Signature]

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____
Authorized Signature

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

Date: _____
Authorized Signature

DISTRICT _____ EPR 2-2-16 PRODUCTION 2-3-16 UIC FEB - 3 2016
Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: **BANTA 'C'** * Location: **HARPER COUNTY -- SEC. 4-31S-8W**

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

* 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

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KANSAS SURFACE OWNER NOTIFICATION ACT**

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Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 33999
Name: LINN OPERATING, INC.
Address 1: 600 TRAVIS STE. 5100
Address 2: _____
City: HOUSTON State: TX Zip: 77002 + _____
Contact Person: SHAWN HILDRETH
Phone: (281) 840-4234 Fax: (_____) _____
Email Address: shildreth@linnenergy.com

Well Location:
____ - ____ - NE Sec. 4 Twp. 31 S. R. 8 ☐ East ☒ West
County: HARPER
Lease Name: BANTA 'C' Well #: _____

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

NE/4

Received
KANSAS CORPORATION COMMISSION
JAN 14 2015
CONSERVATION DIVISION
WICHITA, KS

Surface Owner Information:

Name: LEON J & DIANE C ZOGLMAN
Address 1: 4501 S 295th ST WEST
Address 2: _____
City: CHENEY State: KS Zip: 67025 + _____

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.

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- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 12/31/2015 Signature of Operator or Agent: Shawn Hildreth Title: REGULATORY COMPLIANCE ADVISOR

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 1 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Spivey Grabs

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

Effective Date of Transfer: 01/01/2016

KS Dept of Revenue Lease No.: 106300

Lease Name: TJADEN GAS UNIT

____ - ____ NE - NE Sec. 33 Twp. 30S R. 8 ☐ E ☒ W

Legal Description of Lease: _____

NE NE SEC. 33

County: KINGMAN

Production Zone(s): MISSISSIPPI CHAT

Injection Zone(s): _____

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.
600 TRAVIS STE. 5100, HOUSTON, TEXAS 77002

Phone: 281-840-4234

Date: 12/31/2015

Title: REGULATORY COMPLIANCE ADVISOR

Signature: Shawn Hildreth

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 77090

Phone: 281-893-9400

Oil / Gas Purchaser: PIONEER EXPLORATION, LLC

Date: 12/31/2015

Title: VICE PRESIDENT

Signature: [Signature]

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____

Authorized Signature

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

Date: _____

Authorized Signature

DISTRICT _____ EPR 2-2-16 PRODUCTION 2-3-16 UIC _____

Mail to: Past Operator _____ New Operator _____ District _____

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

FEB - 3 2016

* Lease Name: TJADEN GAS UNIT

* Location: KINGMAN COUNTY -- SEC. 33-30S-8W

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

* 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.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 33999
Name: LINN OPERATING, INC.
Address 1: 600 TRAVIS STE. 5100
Address 2:
City: HOUSTON State: TX Zip: 77002 +
Contact Person: SHAWN HILDRETH
Phone: (281) 840-4234 Fax: ()
Email Address: shildreth@linnenergy.com

Well Location:
- NE - NE Sec. 33 Twp. 30 S. R. 8 ☐ East ☒ West
County: KINGMAN
Lease Name: TJADEN GAS UNIT Well #: 1

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

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

Surface Owner Information:

Name: JON F. MESSENGER, TRUSTEE
Address 1: 1728 SE 30 ST
Address 2:
City: KINGMAN State: KS Zip: 67068 +

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 12/31/2015 Signature of Operator or Agent: *Shawn Hildreth* Title: REGULATORY COMPLIANCE ADVISOR

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

010116_C_J_Boyle_K.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 2 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Spivey Grabs

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

Effective Date of Transfer: 01/01/2016

KS Dept of Revenue Lease No.: 106292

Lease Name: C. J. BOYLE K

_____ NW Sec. 34 Twp. 30S R. 8 ☐ E ☒ W

Legal Description of Lease: _____

NW/4

County: KINGMAN

Production Zone(s): MISSISSIPPI CHAT

Injection Zone(s): _____

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

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.
600 TRAVIS STE. 5100, HOUSTON, TEXAS 77002

Phone: 281-840-4234

Date: 12/31/2015

Title: REGULATORY COMPLIANCE ADVISOR

Signature: Shawn Hildreth

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 77090

Phone: 281-893-9400

Oil / Gas Purchaser: PIONEER EXPLORATION, LLC

Date: 12/31/2015

Title: VICE PRESIDENT

Signature: [Signature]

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____
Authorized Signature

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

Date: _____
Authorized Signature

DISTRICT _____ EPR 2-2-16 PRODUCTION 2-3-16 UIC FEB - 3 2016
Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: C. J. BOYLE K * Location: KINGMAN COUNTY -- SEC. 34-30S-8W

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

* 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

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 33999
Name: LINN OPERATING, INC.
Address 1: 600 TRAVIS STE. 5100
Address 2: _____
City: HOUSTON State: TX Zip: 77002 + _____
Contact Person: SHAWN HILDRETH
Phone: (281) 840-4234 Fax: (_____) _____
Email Address: shildreth@linnenergy.com

Well Location:
_____ NW Sec. 26 Twp. 30 S. R. 8 ☐ East ☒ West
County: KINGMAN

Lease Name: C. J. BOYLE K Well #: _____

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

NW/4

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

Surface Owner Information:

Name: JOHO LLC
Address 1: 1728 SE 30 ST
Address 2: _____
City: KINGMAN State: KS Zip: 67068 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 12/31/2015 Signature of Operator or Agent: Shawn Hildreth Title: REGULATORY COMPLIANCE ADVISOR

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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:

- ☒ Oil Lease: No. of Oil Wells 1 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Spivey Grabs

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

Effective Date of Transfer: 01/01/2016

KS Dept of Revenue Lease No.: 106436

Lease Name: BOYLE N

____ - NW - NE - NE Sec. 34 Twp. 30S R. 8 ☐ E ☒ W

Legal Description of Lease: _____

NW NE NE

County: KINGMAN

Production Zone(s): MISSISSIPPI CHAT

Injection Zone(s): _____

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

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.
600 TRAVIS STE. 5100, HOUSTON, TEXAS 77002

Phone: 281-840-4234

Date: 12/31/2015

Title: REGULATORY COMPLIANCE ADVISOR

Signature: Shawn Hildreth

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 77090

Phone: 281-893-9400

Oil / Gas Purchaser: PIONEER EXPLORATION, LLC

Date: 12/31/2015

Title: VICE PRESIDENT

Signature: [Signature]

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____

Authorized Signature

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

Date: _____

Authorized Signature

DISTRICT _____ EPR 2-2-16 PRODUCTION 2-3-16 UIC _____

Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: BOYLE N

* Location: KINGMAN COUNTY -- SEC. 34-30S-8W

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.

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 33999
Name: LINN OPERATING, INC.
Address 1: 600 TRAVIS STE. 5100
Address 2: _____
City: HOUSTON State: TX Zip: 77002 + _____
Contact Person: SHAWN HILDRETH
Phone: (281) 840-4234 Fax: (_____) _____
Email Address: shildreth@linnenergy.com

Well Location:
_____NW_____NE_____NE Sec. 34 Twp. 30 S. R. 8 ☐ East ☒ West
County: KINGMAN
Lease Name: BOYLE N Well #: 2

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

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

Surface Owner Information:

Name: JOHO LLC
Address 1: 1728 SE 30 ST
Address 2: _____
City: KINGMAN State: KS Zip: 67068 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 12/31/2015 Signature of Operator or Agent: Shawn Hildreth Title: REGULATORY COMPLIANCE ADVISOR

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

100115_Harper_NW.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 1 (Total 5) 42 or this transfer
☐ Gas Lease: No. of Gas Wells **
☐ Gas Gathering System:
☐ Saltwater Disposal Well - Permit No.:
Spot Location: feet from ☐ N / ☐ S Line
 feet from ☐ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.:
Entire Project: ☐ Yes ☐ No
Number of Injection Wells **

Field Name: Easton

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

Effective Date of Transfer: 10/1/2015

KS Dept of Revenue Lease No.: 136271

Lease Name: HARPER (Fuhr 2)

NE - SE - NE - NW Sec. 3 Twp. 9S R. 20 ☒ E ☐ W

Legal Description of Lease: 4317 N, 2946 W from SE corner

County: LEAVENWORTH

Production Zone(s): m^cLouth

Injection Zone(s):

KCC WICHITA

FEB 01 2016

RECEIVED

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. 32316

Past Operator's Name & Address: GLOBAL ENERGY SOLUTIONS, INC

PO Box 309
m^cLouth, KS
Title:

Contact Person: Herb Edwards

Phone:

Date:

Signature: Herb Edwards

RECEIVED
KANSAS CORPORATION COMMISSION
OCT 05 2015
CONSERVATION DIVISION
WICHITA, KS

New Operator's License No. 35204 ✓

New Operator's Name & Address: MSP OIL, LLC (MIKE HARPER)

25511 LECOMPTON RD

WINCHESTER, KS 66097

Title: OWNER/OPERATOR

Contact Person: ELLEN RAY

Phone: 785-220-2437

Oil / Gas Purchaser: MACCLASKEY OIL

Date: 10/1/2015

Signature: Michael Harper

EP&R 2-2-16 2.3.16 FEB - 3 2016

* Lease Name: HARPER * Location: NE SE NE NW 4317 N, 2946 W from SE corner

Received
KANSAS CORPORATION COMMISSION
OCT 05 2015
CONSERVATION DIVISION
WICHITA, KS

* 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

* Lease Name: Harper

* Location: NENW (#4 - SW NENW) Irregular property line

Received _____
KANSAS CORPORATION COMMISSION

~~JUL 09 2015~~

CONSERVATION DIVISION
WICHITA, KS

A separate sheet may be attached if necessary

* Wells 1, 2, 3 Processed & Approved 6/18/05.

~~KEC WICHITA~~

FEB 01 2008

RECEIVED

Received
KANSAS CORPORATION COMMISSION

OCT 05 2015

**CONSERVATION DIVISION
WICHITA, KS**



* 2 0 1 5 R 0 5 8 1 1 2 *

Doc #: 2015R05811

STACY R. DRISCOLL/REGISTER OF DEEDS

LEAVENWORTH COUNTY

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 2nd day of

JULY, 2015.

KCC WICHITA

FEB 01 2016

RECEIVED

Received
KANSAS CORPORATION COMMISSION

OCT 05 2015

CONSERVATION DIVISION
WICHITA, KS

Michael Harper
2015-11-11 Leavenworth Co. KS

11/11/2015

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.

KCC WICHITA

FEB 01 2016

RECEIVED

Received
KANSAS CORPORATION COMMISSION

OCT 05 2015

CONSERVATION DIVISION
WICHITA, KS

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35204
Name: MSP OIL, LLC
Address 1: 25511 LECOMPTON RD
Address 2: _____
City: WINCHESTER State: KS Zip: 66097 + _____
Contact Person: ELLEN RAY
Phone: (785) 220-2437 Fax: (_____) _____
Email Address: eray73@hotmail.com

Well Location:
NE SE NE NW Sec. 3 Twp. 9 S. R. 20 ☒ East ☐ West
County: LEAVENWORTH
Lease Name: HARPER A (MIKE HARPER) PREVIOUS FUHR 2 Well #: 5

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

Surface Owner Information:

Name: MICHAEL HARPER
Address 1: 25511 LECOMPTON RD
Address 2: _____
City: WINCHESTER State: KS Zip: 66097 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 10/1/2015 Signature of Operator or Agent: Michael Harper Title: OWNER/OPERATOR

Received
KANSAS CORPORATION COMMISSION

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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 1 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☐ Saltwater Disposal Well - Permit No.: _____
Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **
Field Name: Chase-Silica

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

Effective Date of Transfer: 1/1/2016
KS Dept of Revenue Lease No.: 104524
Lease Name: State
_____ - C - SW - NW Sec. 4 Twp. 20 S R. 11 ☐ E ☒ W
Legal Description of Lease: See Attachment
SW NW
County: Barton
Production Zone(s): LKC, Arbuckle
Injection Zone(s): _____

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling

☐ Haul-Off ☐ Workover ☒ Drilling

Past Operator's License No. 30606 ✓
Past Operator's Name & Address: Murfin Drilling Company, Inc
250 S Water Suite 300 Wichita, KS 67202
Title: Vice President

Contact Person: Leon Rodak
Phone: 316 267-3241
Date: 1/5/2016
Signature: [Signature]

New Operator's License No. 3911 ✓
New Operator's Name & Address: RAMA Operating Co., Inc
P.O. Box 159 Stafford, KS 67578
Title: Vice President

Contact Person: Robin L. Austin
Phone: 620 234-5191
Oil / Gas Purchaser: _____
Date: 1-4-16
Signature: [Signature]

KCC WICHITA
JAN 22
RECEIVED

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

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

DISTRICT 4 2-1-16 EPR 2-2-16 PRODUCTION 2.3.16 UIC FEB - 3 2016
Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: State * Location: See Attachment

KCC WICHITA
JAN 22 1966
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.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 30606
Name: Murfin Drilling Company, Inc
Address 1: 250 S Water Suite 300
Address 2: _____
City: Wichita State: KS Zip: 67202 + _____
Contact Person: Leon Rodak
Phone: (316) 267-3241 Fax: (_____) _____
Email Address: _____

Well Location:
_____ - C - SW - NW Sec. 4 Twp. 20 S. R. 11 ☐ East ☒ West
County: Barton
Lease Name: State Well #: 1

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

Surface Owner Information:

Name: See Attachment
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1/5/2016 Signature of Operator or Agent: [Signature] Title: VP Production

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

KCC WICHITA

JAN 22 2016

RECEIVED

EXHIBIT "A"
Barton County, Kansas

KCC WICHITA
JAN 22 2006
RECEIVED

COPY

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.

DATE	LESSOR	LESSEE	DESCRIPTION	RECORDED
------	--------	--------	-------------	----------

April 16, 1930	State of Kansas	T. C. Melrose		
----------------	-----------------	---------------	--	--

			Township 20 South, Range 11 West Sections 4 and 5: covering all that portion of the bed of the Arkansas River and islands lying therein, excepting any islands on which patents have been issued, situated within the meander and defined lines of the said river, as shown by the U.S. government survey of 1866-1871 (being all land except actual accretions), within and through the W/2 of Section 4 and the E/2 NE/4 of Section 5. Barton County, Kansas	Book 39, Page 592 General Records
--	--	--	---	--------------------------------------

Indexed
Num. 100
Crossed 100
Direct 100
Invert 100

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
JAN 22 2011
RECEIVED

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

010116_Muir_E.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 _____ **
- ☒ Gas Lease: No. of Gas Wells 1 **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Spivey Grabs

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

Effective Date of Transfer: 01/01/2016

KS Dept of Revenue Lease No.: 204829

Lease Name: MUIR E

_____ - NW - NW - SE Sec. 21 Twp. 31S R. 9 ☐ E ☒ W

Legal Description of Lease: _____

SEC. 21-31S-9W

County: HARPER

Production Zone(s): MISSISSIPPI CHAT

Injection Zone(s): _____

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

Signature: Shawn Hildreth

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

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

Title: VICE PRESIDENT

Signature: [Signature]

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____

Authorized Signature

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

Date: _____

Authorized Signature

DISTRICT _____ EPR 2-2-16 PRODUCTION 2.3.16 UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: MUIR E * Location: HARPER COUNTY -- SEC. 21-31S-9W

[illegible]

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.

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form KSONA-1
July 2014

Form Must Be Typed
Form must be Signed
All blanks must be Filled

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 33999
Name: LINN OPERATING, INC.
Address 1: 600 TRAVIS STE. 5100
Address 2: _____
City: HOUSTON State: TX Zip: 77002 + _____
Contact Person: SHAWN HILDRETH
Phone: (281) 840-4234 Fax: (_____) _____
Email Address: shildreth@linnenergy.com

Well Location:
NW NW SE Sec. 21 Twp. 31 S. R. 9 ☐ East ☒ West
County: HARPER
Lease Name: MUIR E Well #: 1

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

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

Surface Owner Information:

Name: SEE ATTACHMENT
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 12/31/2015 Signature of Operator or Agent: Shawn Hildreth Title: REGULATORY COMPLIANCE ADVISOR

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: 67104

Owner Name: TEDDY G LUKENS REVOCABLE TRUST

Address: 507 N CEDAR

City: MEDICINE LODGE

State: KS

Zip: 67104

Received
KANSAS CORPORATION COMMISSION
JAN 14 2016
CONSERVATION DIVISION
WICHITA, KS

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

090815_City_Coffeyville.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 11 8 oil
☐ Gas Lease: No. of Gas Wells **
☐ Gas Gathering System:
☐ Saltwater Disposal Well - Permit No.:
Spot Location: feet from ☐ N / ☐ S Line
 feet from ☐ E / ☐ W Line
☒ Enhanced Recovery Project Permit No.: E 21770
Entire Project: ☐ Yes ☐ No
Number of Injection Wells 3

Field Name: Cherryvale-Coffeyville

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

Effective Date of Transfer: September 8, 2015

KS Dept of Revenue Lease No.: N/A 115318

Lease Name: City of Coffeyville

N/2 - NE/4 - Sec. 8 Twp. 34 R. 17 ☒ E ☐ W

Legal Description of Lease: The North half of the Northeast quarter (N/2 NE/4) of Section 8,

Township 34, Range 17 East, Except lots 7 and 8, Airport Industrial Park City of Coffeyville, KS 67.3 Acres MOL

County: Montgomery

Production Zone(s): Red Fork

Injection Zone(s): N/A

KCC WICHITA
JAN 08 2016
RECEIVED

Surface Pit Permit No.: N/A
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover OR ☐ Drilling

Past Operator's License No. Unknown 32512 Exp. 9/30/02

Contact Person: n/a

Past Operator's Name & Address: N/a Foster Gas Corp.

Phone: n/a

Title: N/A

Date:

Signature: New Lease agreement attached.

New Operator's License No. 35217 ✓

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: Bryan Allen

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # N/A has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

 is acknowledged as

the new operator and may continue to inject fluids as authorized by

Permit No.: . Recommended action: Permit was

Cancelled 3-10-11

Date:

Authorized Signature

 is acknowledged as

the new operator of the above named lease containing the surface pit

permitted by No.: .

Date:

Authorized Signature

DISTRICT EPR 2-2-16 PRODUCTION 2-3-16 UIC 2-3-16

Mail to: Past Operator New Operator District

~~N/A~~

15318

* Location: N/2 NE/4 of Section 8 Township 34, Range 17 East, Except lots 7 and 8

KCC WICHITA
JAN 08 2016
RECEIVED

* Permit WAS Cancelled
on 3-10-2011
Will need to Apply for
Injection, plug or
Convert to Producer

* 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

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1

July 2014

Form Must Be Typed
Form must be Signed
All blanks must be Filled

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35217
Name: MB Holdings, LLC
Address 1: 2951 CR 2000
Address 2: _____
City: Independence State: KS Zip: 67301 + _____
Contact Person: Bryan Allen
Phone: (620) 870-1660 Fax: (_____) _____
Email Address: _____

Well Location:
_____ - _____ - _____ Sec. 8 Twp. 34 S. R. 17 ☒ East ☐ West
County: Montgomery
Lease Name: City of Coffeyville Well #: _____

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

The North half of the Northeast quarter (N/2 NE/4) of
Section 8, Township 34, Range 17 East, Except lots 7
and 8, Airport Industrial Park City of Coffeyville, KS 67.3
Acres MOL

Surface Owner Information:

Name: City of Coffeyville
Address 1: P.O. Box 1629
Address 2: _____
City: Coffeyville State: ks Zip: 67337 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: Bryan Allen Title: Manager

KCC WICHITA
JAN 08 2016
RECEIVED

OIL AND GAS LEASE

KCC WICHITA
JAN 08 2016
RECEIVED

THIS AGREEMENT, entered into this 8 day of Sept, 2015, between the City of Coffeyville, a municipal corporation, (hereinafter called lessor) and M. B. Holdings, LLC, (hereinafter called lessee), does witness:

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

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1

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
Marilyn Calhoun, Register of Deeds



KCC WICHITA
JAN 08 2016
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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.

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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.

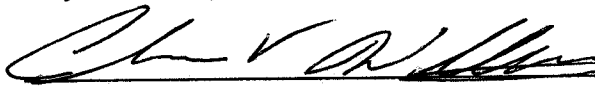
19. All provisions hereof, express or implied, shall be subject to all federal and state laws and the orders, rules, or regulations (and interpretations thereof) of all governmental agencies administering the same, and this lease, shall not be in any way terminated wholly or partially, nor shall the 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 V. Williams, Mayor, Lessor

Attest:

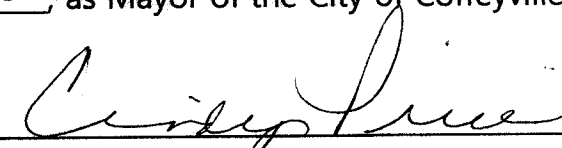

Cindy Price, City Clerk



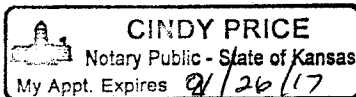
KCC WICHITA
JAN 08 2016
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STATE OF KANSAS)
)
COUNTY OF MONTGOMERY)

The foregoing instrument was acknowledged before me this 22 day of Sept, 2015, by Christopher V. Williams, as Mayor of the City of Coffeyville, Kansas.


NOTARY PUBLIC

My Appointment Expires:



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

111915_Niorara_GG_System.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 _____ **
☐ Gas Lease: No. of Gas Wells _____ **
☒ Gas Gathering System: Niorara
☐ Saltwater Disposal Well - Permit No.: _____
Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: _____

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

Effective Date of Transfer: November 19, 2015

KS Dept of Revenue Lease No.: _____

Lease Name: Niorara Gas Gathering System

NE4 - - - - Sec. 7 Twp. 3S R. 41W ☐ E ☒ W

Legal Description of Lease: _____

County: Cheyenne

Production Zone(s): _____

Injection Zone(s): _____

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ Drilling

Past Operator's License No. _____

Past Operator's Name & Address: WBI Energy Midstream, LLC
1250 West Century Avenue, Bismarck, ND 58501

Title: Customer Service Manager
Approval to process - legal

New Operator's License No. 33725

New Operator's Name & Address: Foundation Energy Fund V-B Holding, LLC
and Foundation Energy Fund

1801 Broadway, Suite 408, Denver, CO 80201

Title: Vice President

Contact Person: Nancy Senger

Phone: 701-530-1585

Date: November 23, 2015

Signature: Nancy Senger

Contact Person: Joel Sauer

Phone: 303-861-0504

Oil / Gas Purchaser: _____

Date: 12-9-2015

Signature: Joel Sauer

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____

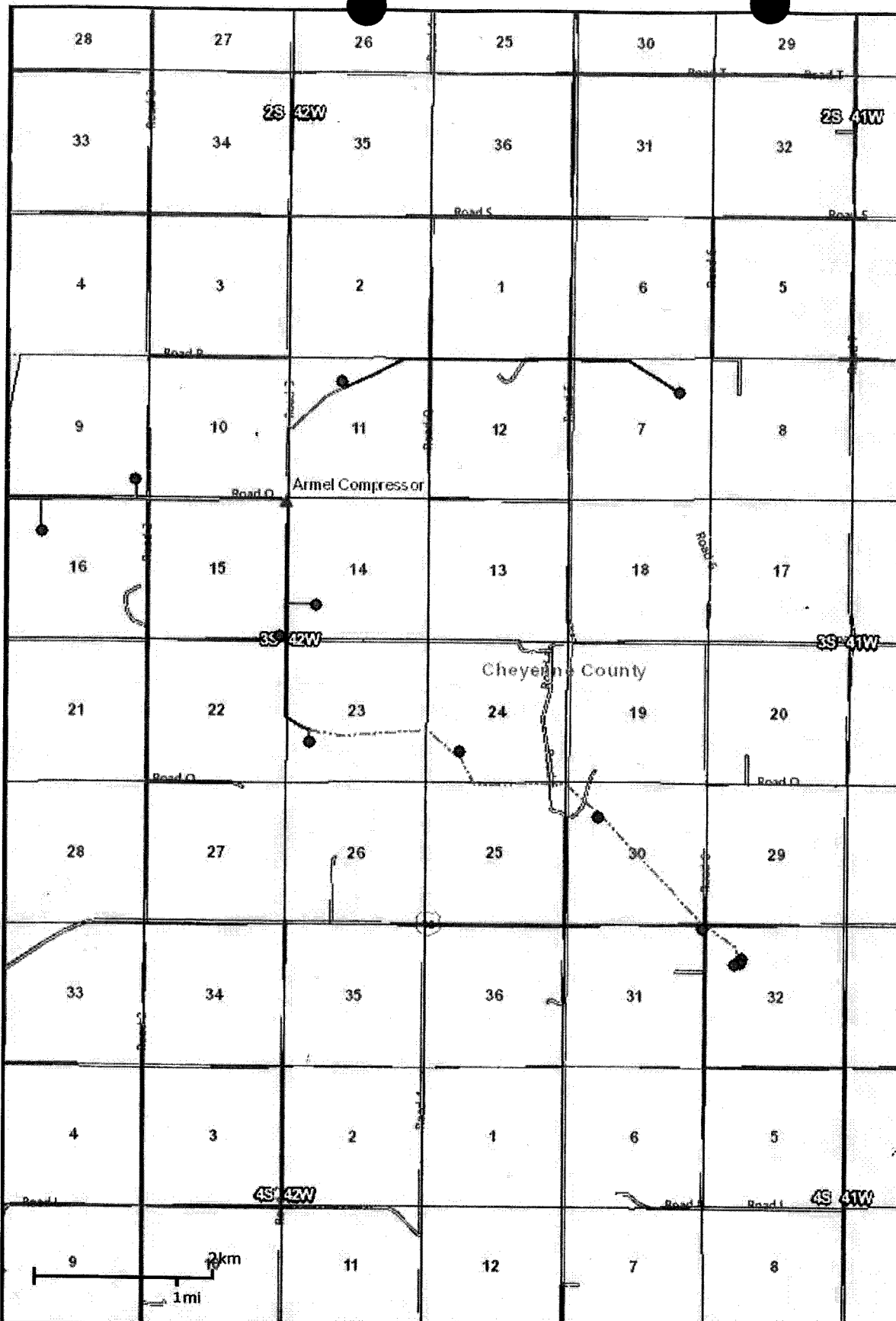
Authorized Signature

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

Date: _____

Authorized Signature

DISTRICT _____ EPR 2-2-16 PRODUCTION 2-2-16 KCR UIC _____
Mail to: Past Operator _____ New Operator _____ District _____



- Legend**
- ▲ CO TWP
 - ▲ KS TWP
 - ▲ CO Sect
 - ▲ KS Sections
 - ▲ Cities and Towns
 - 1 - 5000
 - 5001 - 25000
 - 25001 - 5000
 - 50001 - 1000
 - 100001 - 100
 - ▲ streets / roads
 - ▲ counties
 - ▲ Compressors Sites
 - Abandoned
 - ▲ Active
 - ▲ Inactive
 - ▲ Removed
 - ▲ They Own / W
 - ▲ Delivery_Points
 - ▲ CP Rectifier
 - ▲ Valves
 - ▶▶ Unknown
 - ▶▶ Open
 - ▶▶ Closed
 - ▲ Test Leads

DISCLAIMER: The company makes no representations, warranties or guarantees as to the accuracy and completeness of the enclosed information or data, and is not responsible for any errors or omissions concerning the content and positional accuracy of such information and data.

Map Description
KCC WICHITA
 FEB 01 2016
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KCC WICHITA
 JAN 21 2016
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Cheyenne County

GG00337
WBI ENERGY
 MIDSTREAM Niobrara
 An MDU Resources Group company
 Map Title *System*

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.

Check Applicable Boxes:

- ☒ Oil Lease: No. of Oil Wells 41 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☒ Enhanced Recovery Project Permit No.: E-30,088
- Entire Project: ☒ Yes ☐ No
- Number of Injection Wells 26 **

Field Name: Paola-Rantoul

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

Effective Date of Transfer: 1/1/2016

KS Dept of Revenue Lease No.: 114175 124014

Lease Name: Beckmeyer / McConnel

_____ SE Sec. 32 Twp. 15 R. 21 ☒ E ☐ W

Legal Description of Lease: SE/4 of the Sec.32 Twp.15 R.21E

County: Franklin

Production Zone(s): Squirrel

Injection Zone(s): Squirrel

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 ☐ Drilling

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: 1-25-16

Title: Operator

Signature: [Signature]

New Operator's License No. 32218

Contact Person: Lance Town

KCC WICHITA

New Operator's Name & Address: TDR Construction, Inc.

Phone: 913-710-5400

FEB 03 2016

PO Box 339

Oil / Gas Purchaser: _____

Louisburg, KS 66053

Date: 1-25-16

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Title: Operator

Signature: [Signature]

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____

Authorized Signature

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

Date: _____

Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____

Mail to: Past Operator _____ New Operator _____ District _____

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Side Two

Must Be Filed For All Wells

KDOR Lease No.: 114175 124014

* Lease Name: Beckmeyer / McConnell

* Location: SE/4 of the Sec.32 Twp.15 R.21E

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)
35	15-059-27078-00-00	1470	2125	Oil	PROD
14	15-059-25167-00-00	1036	2500	Oil	PROD
15	15-059-25168-00-00	667	2489	Oil	PROD
3	15-059-01091-00-00	550	750	Oil	PROD
10	15-059-23247-00-00	2142	2469	Oil	PROD
11	15-059-23588-00-00	1742	2144	Oil	PROD
12	15-059-23947-00-00	2119	2130	Oil	PROD
13	15-059-25605-00-00	2441	2095	Oil	PROD
16	15-059-25191-00-00	820	2240	Oil	PROD
17	15-059-25192-00-00	1151	1743	Oil	PROD
18	15-059-25398-00-00	1325	2490	Oil	PROD
19	15-059-25606-00-00	1142	2287	Oil	PROD
20	15-059-25607-00-00	2475	1773	Oil	PROD
21	15-059-25608-00-00	2140	1796	Oil	PROD
22	15-059-25609-00-00	1800	1795	Oil	PROD
23	15-059-25610-00-00	1475	1785	Oil	PROD
24	15-059-26065-00-00	2470	1480	Oil	PROD
25	15-059-26066-00-00	2140	1480	Oil	PROD
26	15-059-26067-00-00	1800	1480	Oil	PROD
27	15-059-25614-00-00	1477	1470	Oil	PROD
28	15-059-26116-00-00	2480	1130	Oil	PROD
29	15-059-26115-00-00	2140	1130	Oil	PROD
30	15-059-26117-00-00	1800	1130	Oil	PROD
31	15-059-26118-00-00	1460	1130	Oil	PROD

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.

Must Be Filed For All Wells

KDOR Lease No.: 114175 124014

* Lease Name: Beckmeyer / McConnel

* Location: SE/4 of the Sec.32 Twp.15 R.21E

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)
32	15-059-26209-00-00	2480	Circle FSL/FNL 800	Oil	PROD
33	15-059-26358-00-00	2140	FSL/FNL 825	Oil	PROD
34	15-059-26359-00-00	1810	FSL/FNL 825	Oil	PROD
5	15-059-19281-00-00	1410	FSL/FNL 2544	Oil	INACTIVE
59-H	15-059-26631-0100	825	FSL/FNL 1155	Oil	PROD
6	15-059-21979-00-00	2519	FSL/FNL 2466	Oil	PROD
8	15-059-19282-00-00	1009	FSL/FNL 2025	Oil	PROD
9	15-059-22703-00-00	1768	FSL/FNL 2471	Oil	PROD
I-1	15-059-25929-00-00	2304	FSL/FNL 2310	Inj	Active
I-10	15-059-25624-00-00	1968	FSL/FNL 1617	Inj	Active
I-11	15-059-25625-00-00	1650	FSL/FNL 1620	Inj	Active
I-12	15-059-25626-00-00	1337	FSL/FNL 1625	Inj	Active
I-13	15-059-26130-00-00	2293	FSL/FNL 1295	Inj	Active
I-14	15-059-26131-00-00	1968	FSL/FNL 1287	Inj	Active
I-15	15-059-26132-00-00	1650	FSL/FNL 1290	Inj	Active
I-16	15-059-26133-00-00	1329	FSL/FNL 1289	Inj	Active
I-17	15-059-26360-00-00	2285	FSL/FNL 975	Inj	Active
I-18	15-059-26361-00-00	1955	FSL/FNL 975	Inj	Active
I-19	15-059-26362-00-00	1625	FSL/FNL 975	Inj	Active
I-2	15-059-25616-00-00	1530	FSL/FNL 2331	Inj	Active
I-5	15-059-25619-00-00	2299	FSL/FNL 1973	Inj	Active
I-6	15-059-25620-00-00	1987	FSL/FNL 1971	Inj	Active
I-7	15-059-25621-00-00	1642	FSL/FNL 1949	Inj	Active
I-8	15-059-25622-00-00	1280	FSL/FNL 1955	Inj	Active

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FEB 03 2016

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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.

Must Be Filed For All Wells

KDOR Lease No.: 114175 124014

* Lease Name: Beckmeyer / McConnell

* Location: SE/4 of the Sec.32 Twp.15 R.21E

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)
I-9	15-059-26068-00-00	1288	1980	Inj	Active
P-2	15-059-26549-00-00	1970	2285	Inj	Active
51	15-059-26240-00-00	165	2475	Oil	PROD
52	15-059-26241-00-00	165	2145	Oil	PROD
53	15-059-26242-00-00	165	1815	Oil	PROD
54	15-059-26243-00-00	165	1485	Oil	PROD
55	15-059-26244-00-00	495	2145	Oil	PROD
56	15-059-26245-00-00	495	1815	Oil	PROD
57	15-059-26246-00-00	495	1485	Oil	PROD
58	15-059-26247-00-00	825	1485	Oil	PROD
60	15-059-26559-00-00	495	1155	Oil	PROD
61	15-059-26560-00-00	165	1155	Oil	PROD
I-50	15-059-26270-00-00	50	2630	Inj	Active
I-51	15-059-26236-00-00	330	2310	Inj	Active
I-52	15-059-26237-00-00	330	1980	Inj	Active
I-53	15-059-26238-00-00	330	1650	Inj	Active
I-54	15-059-26239-00-00	660	1650	Inj	Active
I-55	15-059-26272-00-00	660	1980	Inj	Active
I-56	15-059-26561-00-00	330	1320	Inj	Active
I-57	15-059-26562-00-00	660	1320	Inj	Active
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

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FEB 03 2016

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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.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 34028
Name: Triple T Oil, LLC
Address 1: PO Box 716
Address 2: _____
City: Louisburg State: KS Zip: 66053 + _____
Contact Person: Lance Town
Phone: (913) 710-5400 Fax: (_____) _____
Email Address: NA

Well Location:
_____ - _____ - SE Sec. 32 Twp. 15 S. R. 21 ☒ East ☐ West
County: Franklin
Lease Name: Beckmeyer Well #: ALL

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

SE/4 of the Sec.32 Twp.15S R.21E

Surface Owner Information:

Name: Bonnie Smith
Address 1: 173 E. 1250 Rd.
Address 2: _____
City: Baldwin City State: Ks Zip: 66006 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-25-16 Signature of Operator or Agent: [Signature] Title: Pres. **KCC WICHITA**

FEB 03 2016

RECEIVED

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:

- ☒ Oil Lease: No. of Oil Wells 2 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Ritz - Canton

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

Effective Date of Transfer: 1/4/2016

KS Dept of Revenue Lease No.: 104156

Lease Name: Lindberg A (Lindberg A)

_____ Sec. 15 Twp. 19S R. 2 ☐ E ☒ W

Legal Description of Lease: Northeast Quarter (NE/4) of Section Fifteen (15),
Township Nineteen South (19S), Range Two West (2W)

County: McPherson

Production Zone(s): Mississippian System

Injection Zone(s): _____

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 ☐ 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: Kendra Anderson

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: Kendra Anderson

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____
Authorized Signature

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

Date: _____
Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

KCC WICHITA
FEB 03 2016
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* Location: T19S, R2W, Sec. 15

KCC WICHITA
FEB 03 2016
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.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

*This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent);
T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).
Any such form submitted without an accompanying Form KSONA-1 will be returned.*

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
S2 NW NW NE Sec. 15 Twp. 19 S. R. 2 ☐ East ☒ West
County: McPherson
Lease Name: Lindberg A (Lindberg A) Well #: 1

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

**Northeast Quarter (NE/4) of Section Fifteen (15),
Township Nineteen South (19S), Range Two
West (2W).**

Surface Owner Information:

Name: Eric & Michael Norstrom
Address 1: 2163 Mohawk Rd
Address 2: _____
City: Galva State: KS Zip: 67443 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: [Signature] Title: _____

KCC WICHITA

FEB 03 2016

RECEIVED

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
_____ SE NE NE Sec. 15 Twp. 19 S. R. 2 ☐ East ☒ West
County: McPherson
Lease Name: Lindberg A (Lindberg A) Well #: 2

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

**Northeast Quarter (NE/4) of Section Fifteen (15),
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: _____
City: Modesto State: CA Zip: 95356 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: [Signature] Title: _____

KCC WICHITA
FEB 03 2016
RECEIVED

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:

- ☒ Oil Lease: No. of Oil Wells 2 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☐ Saltwater Disposal Well - Permit No.: _____
Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: Ritz - Canton

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

Effective Date of Transfer: 1/4/2016

KS Dept of Revenue Lease No.: _____

Lease Name: Lindberg (Lindberg)

_____ Sec. 15 Twp. 19S R. 2 ☐ E ☒ W

Legal Description of Lease: Northeast Quarter (NE/4) of Section Fifteen (15),
Township Nineteen South (19S), Range Two West (2W).

County: McPherson

Production Zone(s): Mississippian System

Injection Zone(s): _____

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 ☐ 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: [Signature]

KCC WICHITA

FEB 03 2016

RECEIVED

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

Date: _____

Authorized Signature

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

Date: _____

Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____

Mail to: Past Operator _____ New Operator _____ District _____

* 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

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
SW SW NE NE Sec. 15 Twp. 19 S. R. 2 ☐ East ☒ West
County: McPherson
Lease Name: Lindberg (Lindberg) Well #: 1

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

**Northeast Quarter (NE/4) of Section Fifteen (15),
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: _____
City: Modesto State: CA Zip: 95356 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: Kendra Anderson Title: _____

KCC WIC

FEB 03

RECEIVED

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
S2 S2 NE Sec. 15 Twp. 19 S. R. 2 ☐ East ☒ West
County: McPherson
Lease Name: Lindberg (Lindberg) Well #: 2

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

**Northeast Quarter (NE/4) of Section Fifteen (15),
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: _____
City: Modesto State: CA Zip: 95356 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: Kendra Anderson Title: _____

KCC WICHITA

FEB 03 2016

RECEIVED

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:

- ☒ Oil Lease: No. of Oil Wells 1 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Ritz - Canton

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

Effective Date of Transfer: 1/4/2016

KS Dept of Revenue Lease No.: 104153

Lease Name: Hill (Hill)

 - S2 - NE Sec. 10 Twp. 19S R. 2 ☐ E ☒ W

Legal Description of Lease: South half of the Northeast Quarter (S/2 NE/4) of
Section Ten (10), Township Nineteen (19) South, Range Two (2) West.

County: McPherson

Production Zone(s): Mississippian System

Injection Zone(s): _____

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 ☐ 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: [Signature]

KCC WICHITA

FEB 03 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: [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
the new operator and may continue to inject fluids as authorized by
Permit No.: _____. Recommended action: _____

Date: _____

Authorized Signature

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

Date: _____

Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: Hill (Hill)

* Location: S2 NE Sec. 10, T19S, R2W

KCC WICHITA
FEB 03 2016
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.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
_____ - S2 - NE Sec. 10 Twp. 19 S. R. 2 ☐ East ☒ West
County: McPherson
Lease Name: Hill (Hill) Well #: 1
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: Kuttler Family Trust, MD Jr & Betty Kuttler
Address 1: 54-948 Riviera St.
Address 2: _____
City: LaQuinta State: CA Zip: 92253 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: [Signature] Title: _____

KCC WICHITA

FEB 03 2016

RECEIVED

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:

- ☒ Oil Lease: No. of Oil Wells 1 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☒ Saltwater Disposal Well - Permit No.: E-22468.1
- Spot Location: 1711 feet from ☐ N / ☒ S Line
- 1308 feet from ☒ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Ritz - Canton

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

Effective Date of Transfer: 1/4/2016

KS Dept of Revenue Lease No.: 104161

Lease Name: Ostlund (Ostlund)

- NE - NW - SE Sec. 10 Twp. 19S R. 2 ☐ E ☒ W

Legal Description of Lease: North half of the Southeast Quarter (N/2 SE/4) of
Section Ten (10), Township Nineteen South (19S), Range Two West (2W)

County: McPherson

Production Zone(s): Mississippian System

Injection Zone(s): _____

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 ☐ 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: [Signature] **KCC WICHITA**

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

Date: _____

Authorized Signature

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

Date: _____

Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____

Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: Ostlund (Ostlund) * Location: NE NW SE Sec. 10, T19S, R2W

KCC WICHITA
FEB 03 2016
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.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

*This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent);
T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).
Any such form submitted without an accompanying Form KSONA-1 will be returned.*

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
NE NW SE Sec. 10 Twp. 19 S. R. 2 ☐ East ☒ West
County: McPherson
Lease Name: Ostlund (Ostlund) Well #: 2

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

**North half of the Southeast Quarter (N/2 SE/4) of
Section Ten (10), Township Nineteen South
(19S), Range Two West (2W).**

Surface Owner Information:

Name: Ostlund Natural Resources
Address 1: P.O. Box 473
Address 2: _____
City: Mt. Hope State: KS Zip: 67108 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: [Signature] Title: _____

KCC WICHITA

FEB 03 2016

RECEIVED

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
W2 SW NE SE Sec. 10 Twp. 19 S. R. 2 ☐ East ☒ West
County: McPherson
Lease Name: Ostlund (Ostlund) Well #: 3

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

**North half of the Southeast Quarter (N/2 SE/4) of
Section Ten (10), Township Nineteen South
(19S), Range Two West (2W).**

Surface Owner Information:

Name: Ostlund Natural Resources
Address 1: P.O. Box 473
Address 2: _____
City: Mt. Hope State: KS Zip: 67108 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: [Signature] Title: _____

KCC WICHITA

FEB 03 2016

RECEIVED

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION**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 1 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☐ Saltwater Disposal Well - Permit No.: _____
Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **
Field Name: Ritz - Canton

**** Side Two Must Be Completed.**Effective Date of Transfer: 1/4/2016KS Dept of Revenue Lease No.: 117005Lease Name: Anderson Bud (Bud Anderson)NE - NE - NW Sec. 1 Twp. 20S R. 2 ☐ E ☒ W
Northwest Quarter of the Northwest Quarter (NW1/4 NW1/4) and the North 9.05 acres ofLegal Description of Lease: _____
the Northeast Quarter of the Northwest Quarter (N. 9.05 Ac NE1/4 NW1/4), Section One (1), Township Twenty South (20S) Range Two West (2W)County: McPherson

Production Zone(s): _____

Injection Zone(s): _____

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)Type of Pit: ☐ Emergency ☐ Burn ☐ Settling☐ Haul-Off ☐ Workover ☐ DrillingPast Operator's License No. 5731Past Operator's Name & Address: Kent Anderson
308 N. Main, Galva, KS 67443-8803

Title: _____

Contact Person: Kendra AndersonPhone: 620-245-7390Date: 1-4-16Signature: [Signature]

KCC WICHITA

FEB 03 2016

RECEIVED

New Operator's License No. 35275New Operator's Name & Address: Kendra A. Anderson
509 N. Santa Fe St., Galva, KS 67443

Title: _____

Contact Person: Kendra AndersonPhone: 620-245-7390Oil / Gas Purchaser: CHS McPherson Refinery Inc.Date: 1-4-16Signature: [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
the new operator and may continue to inject fluids as authorized by
Permit No.: _____. Recommended action: _____

Date: _____ Authorized Signature _____

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

Date: _____ Authorized Signature _____

DISTRICT _____

EPR _____

New Operator _____

PRODUCTION _____

District _____

UIC _____

Mail to: Past Operator _____

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

* Location: NE NE NW Sec. 1, T20S, R2W

KCC WICHITA
FEB 03 2016
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.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
NE NE NW Sec. 1 Twp. 20 S. R. 2 ☐ East ☒ West
County: McPherson
Lease Name: Anderson Bud (Bud Anderson) Well #: 1

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

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 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: Kendra Anderson Title: _____

KCC WICHITA

FEB 03 2016

RECEIVED

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:

- ☒ Oil Lease: No. of Oil Wells 1 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☐ Saltwater Disposal Well - Permit No.: _____
Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: Ritz - Canton

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

Effective Date of Transfer: 1/4/2016

KS Dept of Revenue Lease No.: 117179

Lease Name: Thompson B (Thompson B)

NE NE SE Sec. 22 Twp. 19S R. 2 ☐ E ☒ W

Legal Description of Lease: North half of the Southeast Quarter (N/2 SE/4) of Section

Twenty-Two (22), Township Nineteen (19) South, Range Two (2) West containing 80 acres more or less.

County: McPherson

Production Zone(s): Mississippian System

Injection Zone(s): _____

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 ☐ 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: [Signature]

KCC WICHITA

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: [Signature]

FEB 03 2016

RECEIVED

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____
Authorized Signature

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

Date: _____
Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: Thompson B (Thompson B)

* Location: NE NE SE Sec. 22, T19S, R2W

[illegible]

* 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.

KCC WICHITA

FEB 03 2015

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

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
NE NE SE Sec. 22 Twp. 19 S. R. 2 ☐ East ☒ West
County: McPherson
Lease Name: Thompson B (Thompson B) Well #: 1-B

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

Surface Owner Information:

Name: Debra L (Decker) Edwards ETAL
Address 1: 978 14th Ave.
Address 2: _____
City: McPherson State: KS Zip: 67460 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: [Signature] Title: _____

KCC WICHITA

FEB 03 2016

RECEIVED

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:

- ☒ Oil Lease: No. of Oil Wells 1 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Ritz - Canton

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

Effective Date of Transfer: 1/4/2016

KS Dept of Revenue Lease No.: 104174

Lease Name: J.J. Becker (J.J. Becker)

SE - SE - SE Sec. 36 Twp. 19S R. 2 ☐ E ☒ W

Legal Description of Lease: Southeast Quarter of the Southeast Quarter of the Southeast Quarter

(SE/4 SE/4 SE/4) of Section Thirty-Six (36), Township Nineteen South (19S), Range Two West (2W).

County: McPherson

Production Zone(s): _____

Injection Zone(s): _____

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling

☐ Haul-Off ☐ Workover ☐ Drilling

Past Operator's License No. 5731

Past Operator's Name & Address: Kent Anderson

308 N. Main, Galva, KS 67443-8803

Title: _____

Contact Person: Kendra Anderson

Phone: 620-245-7390

Date: 1-4-16

Signature: [Signature]

New Operator's License No. 35275

New Operator's Name & Address: Kendra A. Anderson

509 N. Santa Fe St., Galva, KS 67443

Title: _____

Contact Person: Kendra Anderson

Phone: 620-245-7390

Oil / Gas Purchaser: CHS McPherson Refinery Inc.

Date: 1-4-16

Signature: [Signature]

KCC WICHITA

FEB 03 2016

RECEIVED

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____
Authorized Signature

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

Date: _____
Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

* Location: SE SE SE Sec. 36, T19S, R2W

KCC WICHITA
FEB 03 2016
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.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

*This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent);
T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).
Any such form submitted without an accompanying Form KSONA-1 will be returned.*

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
____ SE ____ SE ____ SE Sec. 36 Twp. 19 S. R. 2 ☐ East ☒ West
County: McPherson
Lease Name: J.J. Becker (J.J. Becker) Well #: 1
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: Elaine M Morse Trust TTEE
Address 1: 26 Lois Ln.
Address 2: _____
City: Marion State: KS Zip: 66861 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: [Signature] Title: _____

KCC WICHITA

FEB 03 2016

RECEIVED

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:

- ☒ Oil Lease: No. of Oil Wells 1 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Ritz - Canton

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

Effective Date of Transfer: 1/4/2016

KS Dept of Revenue Lease No.: 104175

Lease Name: Becker P.J. (Becker, P.J.)

- N2 - SE - NE Sec. 36 Twp. 19S R. 2 ☐ E ☒ W

Legal Description of Lease: Southeast Quarter of the Northeast Quarter (SE/4 NE/4) of

Section Thirty-Six (36), Township Nineteen South (19S) Range Two West (2W) containing 40 acres more or less.

County: McPherson

Production Zone(s): _____

Injection Zone(s): _____

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling

☐ Haul-Off ☐ Workover ☐ Drilling

Past Operator's License No. 5731

Past Operator's Name & Address: Kent Anderson

308 N. Main, Galva, KS 67443-8803

Title: _____

Contact Person: Kendra Anderson

Phone: 620-245-7390

Date: 1-4-16

Signature: [Signature]

KCC WICHITA

FEB 03 2016

New Operator's License No. 35275

New Operator's Name & Address: Kendra A. Anderson

509 N. Santa Fe St., Galva, KS 67443

Title: _____

Contact Person: Kendra Anderson

Phone: 620-245-7390

Oil / Gas Purchaser: CHS McPherson Refinery Inc.

Date: 1-4-16

Signature: [Signature]

RECEIVED

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____
Authorized Signature

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

Date: _____
Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1
July 2014

**Form Must Be Typed
Form must be Signed
All blanks must be Filled**

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
N2 SE NE Sec. 36 Twp. 19 S. R. 2 ☐ East ☒ West
County: McPherson
Lease Name: Becker P.J. (Becker P.J.) Well #: 1

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

Surface Owner Information:

Name: Duane G & Jenine S Becker
Address 1: 1269 24th Ave.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: Kendra Anderson Title: _____

KCC WICHITA

FEB 03 2016

RECEIVED

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:

- ☐ Oil Lease: No. of Oil Wells _____ **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☒ Saltwater Disposal Well - Permit No.: E25635.1
- Spot Location: 1004 feet from ☐ N / ☒ S Line
- 1991 feet from ☒ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Round Hill

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

Effective Date of Transfer: 1/4/2016

KS Dept of Revenue Lease No.: _____

Lease Name: Miller

 - NW - SW - SE Sec. 36 Twp. 19S R. 2 ☐ E ☒ W

Legal Description of Lease: 1004 North, 1991 West from SE Corner

County: McPherson

Production Zone(s): _____

Injection Zone(s): _____

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 ☐ 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: [Signature]

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: [Signature]

KCC WICHITA

FEB 03 2016

RECEIVED

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____

Authorized Signature

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

Date: _____

Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____

Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: Miller * Location: NW SW SE Sec. 36, T19S, R2W

KCC WICHITA
FEB 03 2016
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.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1
July 2014
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T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).
Any such form submitted without an accompanying Form KSONA-1 will be returned.*

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
NW SW SE Sec. 36 Twp. 19 S. R. 2 ☐ East ☒ West
County: McPherson
Lease Name: Miller Well #: 3
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Surface Owner Information:

Name: Marlys A Marston Rev. Trust
Address 1: 1 Park Ave Apt 114
Address 2: _____
City: Hillsboro State: KS Zip: 67063 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: Kendra Anderson Title: _____

KCC WICHITA

FEB 03 2016

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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:

☒ Oil Lease: No. of Oil Wells 1 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☒ Saltwater Disposal Well - Permit No.: E14770.1
Spot Location: 4850 feet from ☐ N / ☒ S Line
4978 feet from ☒ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **
Field Name: Round Hill

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

Effective Date of Transfer: 1/4/2016
KS Dept of Revenue Lease No.: 104210
Lease Name: Krehbiel A (Krehbiel A)
____ - SW - SW - NW Sec. 33 Twp. 18S R. 1 ☐ E ☒ W
Legal Description of Lease: Northwest Quarter (NW/4) of Section Thirty-Three (33),
Township Eighteen South (18S), Range One West (1W)
County: McPherson
Production Zone(s): _____
Injection Zone(s): _____

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 ☐ Drilling

Past Operator's License No. 5731
Past Operator's Name & Address: Kent Anderson
308 N. Main, Galva, KS 67443-8803
Title: _____

Contact Person: Kendra Anderson
Phone: 620-245-7390
Date: 1-4-16
Signature: [Signature]

KCC WICHITA
FEB 03 2016

New Operator's License No. 35275
New Operator's Name & Address: Kendra A. Anderson
509 N. Santa Fe St., Galva, KS 67443
Title: _____

Contact Person: Kendra Anderson
Phone: 620-245-7390
Oil / Gas Purchaser: CHS McPherson Refinery Inc.
Date: 1-4-16
Signature: [Signature]

RECEIVED

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

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

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: Krehbiel A (Krehbiel A) * Location: SW SW NW Sec.33, T18S, R1W

[illegible]

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.

KCC WICHITA
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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1
July 2014

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Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
SW SW SW NW Sec. 33 Twp. 18 S. R. 1 ☐ East ☒ West
County: McPherson
Lease Name: Krehbiel A (Krehbiel A) Well #: 1

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

**Northwest Quarter (NW/4) of Section
Thirty-Three (33), Township Eighteen South
(18S), Range One West (1W)**

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 surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

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Date: 1-4-16 Signature of Operator or Agent: [Signature] Title: _____

KCC WICHITA

FEB 03 2016

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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
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Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
____ NW ____ NW ____ NW Sec. 33 Twp. 18 S. R. 1 ☐ East ☒ West
County: McPherson
Lease Name: Krehbiel A (Krehbiel A) Well #: 1

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

**Northwest Quarter (NW/4) of Section
Thirty-Three (33), Township Eighteen South
(18S), Range One West (1W)**

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 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.

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If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: [Signature] Title: _____

KCC WICHITA

FEB 03 2016

RECEIVED

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:

- ☒ Oil Lease: No. of Oil Wells 1 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Jenday

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

Effective Date of Transfer: 1/4/2016

KS Dept of Revenue Lease No.: 134737

Lease Name: Nightingale (Nightingale)

NE - NE - SE Sec. 1 Twp. 19S R. 2 ☐ E ☒ W

Legal Description of Lease: North half of the Southeast Quarter (N/2 SE/4) of
Section One (1), Township Nineteen South (19S), Range Two West (2W).

County: McPherson

Production Zone(s): Mississippian System

Injection Zone(s): _____

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 ☐ 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: Kendra Anderson **KCC WICHITA**

New Operator's License No. 35275

Contact Person: Kendra Anderson **FEB 03 2016**

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: Kendra Anderson

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____

Authorized Signature

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

Date: _____

Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: Nightingale (Nightingale)

* Location: NE NE SE Sec. 1, T19S, R2W

[illegible]

* 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

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
____ NE NE SE Sec. 1 Twp. 19 S. R. 2 ☐ East ☒ West
County: McPherson
Lease Name: Nightingale (Nightingale) Well #: 1

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

**North half of the Southeast Quarter (N/2 SE/4) of
Section One (1), Township Nineteen South
(19S), Range Two West (2W).**

Surface Owner Information:

Name: Gary & Gaylene Nightingale
Address 1: 1274 27th Ave.
Address 2: _____
City: Canton State: KS Zip: 67428 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: Kendra Anderson Title: _____

KCC WICHITA

FEB 03 2016

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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
____SE____NE____SE Sec. 1 Twp. 19 S. R. 2 ☐ East ☒ West
County: McPherson
Lease Name: Nightingale (Nightingale) Well #: 2

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

**North half of the Southeast Quarter (N/2 SE/4) of
Section One (1), Township Nineteen South
(19S), Range Two West (2W).**

Surface Owner Information:

Name: Gary & Gaylene Nightingale
Address 1: 1274 27th Ave.
Address 2: _____
City: Canton State: KS Zip: 67428 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: [Signature] Title: _____

KCC WICHITA

FEB 03 2016

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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:

- ☒ Oil Lease: No. of Oil Wells 1 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Round Hill

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

Effective Date of Transfer: 1/4/2016

KS Dept of Revenue Lease No.: 104209

Lease Name: Johnson Julia (Johnson Julia)

SW - SW - SW Sec. 28 Twp. 18S R. 1 ☐ E ☒ W

Legal Description of Lease: Southwest Quarter (SW/4) of Section Twenty-Eight (28),

Township Eighteen South (18S), Range One West (1W)

County: McPherson

Production Zone(s): Cherokee Group

Injection Zone(s): _____

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 ☐ 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: Kendra Anderson

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: Kendra Anderson

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____
Authorized Signature

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

Date: _____
Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

* Location: SW SW SW Sec. 28, T18S, R1W

KCC WICHITA
FEB 03 2015
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* 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

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35275
Name: Kendra A. Anderson
Address 1: 509 N. Santa Fe St.
Address 2: _____
City: Galva State: KS Zip: 67443 + _____
Contact Person: Kendra Anderson
Phone: (620) 245-7390 Fax: (_____) _____
Email Address: anderken@yahoo.com

Well Location:
_____ SW _____ SW _____ SW Sec. 28 Twp. 18 S. R. 1 ☐ East ☒ West
County: McPherson
Lease Name: Johnson Julia (Johnson Julia) Well #: 1

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

Surface Owner Information:

Name: DVT Farms LC
Address 1: 4200 Charleston Ave
Address 2: _____
City: Hutchinson State: KS Zip: 67502 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-4-16 Signature of Operator or Agent: Kendra Anderson Title: _____

KCC WICHITA

FEB 03 2016

RECEIVED

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**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.

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

Check Applicable Boxes:

- ☒ Oil Lease: No. of Oil Wells 39 **
☐ Gas Lease: No. of Gas Wells **
☐ Gas Gathering System:
☐ Saltwater Disposal Well - Permit No.:
Spot Location: feet from ☐ N / ☐ S Line
 feet from ☐ E / ☐ W Line
☒ Enhanced Recovery Project Permit No.: E25485
Entire Project: ☒ Yes ☐ No
Number of Injection Wells 21 **

Field Name:

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

Effective Date of Transfer: JANUARY 30, 2016

KS Dept of Revenue Lease No.: 121434

Lease Name: was RED DRAGON OIL - now DRAGONSLAYER, LLC

 Sec. 29 Twp. 14 R. 22 ☒ E ☐ W

Legal Description of Lease: NW1/4 29 14S 22E

County: JOHNSON

Production Zone(s): BARTLESVILLE

Injection Zone(s): BURGESS

KCC WICHITA

FEB 03 2016

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

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ Drilling
 feet from ☐ N / ☐ S Line of Section
 feet from ☐ E / ☐ W Line of Section

Past Operator's License No. LELIA M ROBERTS 34262
Past Operator's Name & Address: LELIA M ROBERTS
PO BOX 421, OLATHE, KS 66051
Title: OPERATOR

Contact Person: LELIA M ROBERTS

Phone: 913-764-2859

Date: FEBRUARY 1, 2016

Signature: Judith L Musgrave, Secretary
of the Estate of Lelia M Roberts

New Operator's License No. 35289
New Operator's Name & Address: DRAGONSLAYER, LLC
25975 W 143RD PL, OLATHE, KS 66061-7554
Title: OWNER/OPERATOR

Contact Person: JUDITH L MUSGRAVE

Phone: 817-300-7034

Oil / Gas Purchaser: COFFEYVILLE RESOURCES

Date: FEBRUARY 1, 2016

Signature: Judith L Musgrave

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

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

DISTRICT EPR PRODUCTION UIC
Mail to: Past Operator New Operator District

Must Be Filed For All Wells

* Lease Name: was RED DRAGON OIL - now DRAGONSLAYER, LLC * Location: NW1/4 29-14S-22E JOHNSON COUNTY

KCC WICHITA
FEB 03 2016
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* 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.

KODR LEASE NO. 121434

KOLAR

KCC Forms Licensing Ad Valorem Settings Tools Help

Group 14425 KCC Lic 03/02 User 34808 Leah M. Roberts

Logout

Well Inventory - Snapshot

Back

Well Inventory According to the KCC

Roberts, Leah M

June 01, 2015

Number of wells: 61

Lease Name	Well No.	API Number	Year Drilled	Year Assn Resp.	Depth	County	Sec	Twp	Rge	Dir	Q4	Q3	Q2	Q1	Feet N-S	Feet E-W	Well Type	Well Status	Gas Lease Codes	Oil Lease Codes	Latitude	Longitude	Datum
RED DRAGON...	1	15-091-21249-0000			862	Johnson	29	14	22	E	SW	SW	SW	NW	2464	N	175	W	OIL	PR		121434	
RED DRAGON...	10	15-091-21562-0000			940	Johnson	29	14	22	E	SW	NW	NE	NW	3300	S	4620	E	OIL	PR		121434	
RED DRAGON...	11	15-091-21593-0000			900	Johnson	29	14	22	E	SW	NW	NE	NW	4640	S	3650	E	OIL	PR		121434	
RED DRAGON...	12	15-091-21620-0000			920	Johnson	29	14	22	E	NE	SE	SW	NW	3295	S	4125	E	OIL	PR		121434	
RED DRAGON...	13	15-091-21634-0000			920	Johnson	29	14	22	E	NW	SW	SE	NW	3216	S	3640	E	OIL	PR		121434	
RED DRAGON...	15	15-091-21687-0000	1985		940	Johnson	29	14	22	E	SW	NE	SE	NW	3310	S	3216	E	OIL	PR		121434	
RED DRAGON...	16	15-091-21749-0000	1986		920	Johnson	29	14	22	E	NE	SW	SE	NW	3216	S	3310	E	OIL	PR		121434	
RED DRAGON...	17	15-091-21754-0000	1986		920	Johnson	29	14	22	E	NE	SE	SE	NW	3216	S	2890	E	OIL	PR		121434	
RED DRAGON...	18	15-091-21831-0000	1987		890	Johnson	29	14	22	E	SW	NE	SE	NW	3516	S	3135	E	OIL	PR		121434	
RED DRAGON...	19	15-091-21881-0000	1987		920	Johnson	29	14	22	E	SW	NW	SE	NW	3546	S	3640	E	OIL	PR		121434	
RED DRAGON...	2	15-091-21903-0001			863	Johnson	29	14	22	E	SW	SW	NW	NW	3245	S	4775	E	EOR	TH		121434	
RED DRAGON...	20	15-091-21955-0000	1988		900	Johnson	29	14	22	E	N2	NW	NW	NW	5115	S	4675	E	WSW	PR		121434	
RED DRAGON...	21	15-091-21958-0000	1988		960	Johnson	29	14	22	E	SE	NW	NW	NW	4675	S	4675	E	OIL	PR		121434	
RED DRAGON...	22	15-091-21960-0000	1988		900	Johnson	29	14	22	E	NE	SW	NW	NW	4300	S	4675	E	OIL	PR		121434	
RED DRAGON...	23	15-091-21972-0000	1988		900	Johnson	29	14	22	E	NW	SE	SW	NW	3058	S	4455	E	OIL	PR		121434	
RED DRAGON...	24	15-091-22068-0000	1989		920	Johnson	29	14	22	E	SW	NW	NW	NW	4785	S	5115	E	OIL	PR		121434	
RED DRAGON...	25-1	15-091-22081-0000	1989		880	Johnson	29	14	22	E	NW	NW	NW	NW	4930	S	4895	E	EOR	TH		121434	
RED DRAGON...	26-1	15-091-22082-0000	1989		830	Johnson	29	14	22	E	SE	NW	SE	NW	3375	S	3430	E	EOR	TH		121434	
RED DRAGON...	27	15-091-22191-0000	1990		910	Johnson	29	14	22	E	SW	NE	NW	NW	3986	S	3640	E	OIL	PR		121434	
RED DRAGON...	28	15-091-22182-0000	1990		891	Johnson	29	14	22	E	SW	SE	NE	NW	3986	S	3200	E	OIL	PR		121434	
RED DRAGON...	29	15-091-22282-0000	1991		910	Johnson	29	14	22	E	SW	NE	NW	NW	4445	S	3529	E	OIL	PR		121434	
RED DRAGON...	3	15-091-21336-0000			866	Johnson	29	14	22	E	NE	SW	SW	NW	3145	S	4775	E	OIL	PR		121434	
RED DRAGON...	30	15-091-22283-0000	1991		935	Johnson	29	14	22	E	NW	SE	NE	NW	4405	S	3096	E	OIL	PR		121434	
RED DRAGON...	31	15-091-22391-0000	1991		923	Johnson	29	14	22	E	SE	SE	NW	NW	3986	S	4040	E	OIL	PR		121434	
RED DRAGON...	32	15-091-22392-0000	1991		923	Johnson	29	14	22	E	NW	SW	NE	NW	4445	S	3925	E	OIL	PR		121434	
RED DRAGON...	34-1	15-091-22469-0000	1992		920	Johnson	29	14	22	E	SW	NW	NW	NW	4130	S	4850	E	EOR	AI		121434	
RED DRAGON...	35-1	15-091-22470-0000	1992		920	Johnson	29	14	22	E	SE	NW	SW	NW	3576	S	4834	E	EOR	AI		121434	
RED DRAGON...	36-1	15-091-22557-0000	1993		900	Johnson	29	14	22	E	SW	SW	NE	NW	4260	S	3760	E	EOR	AI		121434	
RED DRAGON...	37-1	15-091-22562-0000	1993		910	Johnson	29	14	22	E	SW	NE	NW	NW	4270	S	3320	E	EOR	AI		121434	
RED DRAGON...	38-1	15-091-22605-0000	1994		910	Johnson	29	14	22	E	NW	NE	SE	NW	3820	S	3260	E	EOR	AI		121434	
RED DRAGON...	39-1	15-091-22606-0000	1994		900	Johnson	29	14	22	E	NE	NW	SE	NW	3820	S	3320	E	EOR	AI		121434	
RED DRAGON...	4	15-091-21394-0000			849	Johnson	29	14	22	E	NW	NW	SW	NW	1475	N	165	W	OIL	PR		121434	
RED DRAGON...	40-1	15-091-22623-0000	1995		910	Johnson	29	14	22	E	SW	SE	NW	NW	4150	S	4500	E	EOR	AI		121434	
RED DRAGON...	41-1	15-091-22638-0000	1995		903	Johnson	29	14	22	E	SE	SE	NW	NW	4230	S	4180	E	EOR	AI		121434	
RED DRAGON...	42-1	15-091-22607-0000	1994		915	Johnson	29	14	22	E	NW	NE	SW	NW	3645	S	4380	E	EOR	AI		121434	
RED DRAGON...	43-1	15-091-22645-0000	1995		910	Johnson	29	14	22	E	SE	NE	SW	NW	3550	S	3975	E	EOR	AI		121434	
RED DRAGON...	44	15-091-22637-0000	1995		900	Johnson	29	14	22	E	NW	SE	NW	NW	4420	S	4320	E	OIL	PR		121434	
RED DRAGON...	45	15-091-22624-0000	1995		900	Johnson	29	14	22	E	SW	SE	NW	NW	4600	S	4320	E	OIL	PR		121434	
RED DRAGON...	46	15-091-22709-0000	1996		910	Johnson	29	14	22	E	NW	NE	NW	NW	5120	S	4320	E	OIL	PR		121434	
RED DRAGON...	47	15-091-22712-0000	1996		910	Johnson	29	14	22	E	NE	NE	NW	NW	5120	S	3970	E	OIL	PR		121434	
RED DRAGON...	48	15-091-22728-0001	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	NW	NW	4785	S	4320	E	OIL	PR		121434	
RED DRAGON...	5	15-091-21385-0000			871	Johnson	29	14	22	E	NW	SW	NW	NW	815	N	165	W	OIL	PR		121434	
RED DRAGON...	50	15-091-22683-0000	1996		900	Johnson	29	14	22	E	SE	NE	NW	NW	4785	S	3970	E	OIL	PR		121434	
RED DRAGON...	51	15-091-22729-0000	1996		910	Johnson	29	14	22	E	SE	NW	NE	NW	4785	S	3465	E	OIL	PR		121434	
RED DRAGON...	52-1	15-091-22710-0000	1996		910	Johnson	29	14	22	E	NW	NE	NW	NW	4950	S	4500	E	EOR	AI		121434	
RED DRAGON...	53-1	15-091-22711-0000	1996		900	Johnson	29	14	22	E	NE	NE	NW	NW	4950	S	4180	E	EOR	AI		121434	
RED DRAGON...	54-1	15-091-22735-0000	1996		900	Johnson	29	14	22	E	NW	NE	NW	NW	4950	S	3720	E	EOR	AI		121434	
RED DRAGON...	55-1	15-091-22693-0000	1996		920	Johnson	29	14	22	E		NW	NW	NW	4535	S	4510	E	EOR	AI		121434	
RED DRAGON...	56-1	15-091-22684-0000	1996		900	Johnson	29	14	22	E		NW	SE	NW	4620	S	4180	E	EOR	AI		121434	
RED DRAGON...	57-1	15-091-22734-0000	1996		900	Johnson	29	14	22	E		NW	SE	NW	3760	S	3720	E	EOR	AI		121434	
RED DRAGON...	58	15-091-22714-0000	1996		880	Johnson	29	14	22	E	E2	NE	NE	NW	4260	S	2805	E	OIL	PR		121434	
RED DRAGON...	59	15-091-22715-0000	1996		900	Johnson	29	14	22	E	NE	NE	SE	NW	3820	S	2805	E	OIL	PR		121434	
RED DRAGON...	6	15-091-21431-0002			858	Johnson	29	14	22	E	NW	SW	NW	NW	3475	S	5115	E	OIL	PR		121434	
RED DRAGON...	60-1	15-091-22682-0000	1996		920	Johnson	29	14	22	E	SE	SW	NW	NW	3050	S	4125	E	EOR	AI		121434	
RED DRAGON...	61	15-091-23436-0000	2010		900	Johnson	29	14	22	E	NE	NW	SW	NW	3650	S	4640	E	OIL	PR		121434	
RED DRAGON...	62-1	15-091-23437-0000	2010		902	Johnson	29	14	22	E	NE	SW	SW	NW	3283	S	4833	E	EOR	AI		121434	
RED DRAGON...	7	15-091-21472-0000			940	Johnson	29	14	22	E	NW	NW	NW	NW	5115	S	5115	E	OIL	PR		121434	
RED DRAGON...	8	15-091-21525-0000			920	Johnson	29	14	22	E	S2	S2	SW	NW	2805	S	4620	E	OIL	PR		121434	
RED DRAGON...	9	15-091-21526-0000			920	Johnson	29	14	22	E	SE	SE	SW	NW	2805	S	4125	E	OIL	PR		121434	
RED DRAGON...	WW1	15-091-21978-0000	1988		1240	Johnson	29	14	22	E	SW	SW	SW	NW	2759	S	5045	E	OIL	PR		121434	

WATER

KCC WICHITA
FEB 03 2016
RECEIVED

For any filing made by the operator or on behalf of the operator, the operator on whose behalf the filing was made is responsible for compliance with all Commission rules and regulations relating to the filing and any permit issued by the Commission.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1

July 2014

Form Must Be Typed
Form must be Signed
All blanks must be Filled

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35289
Name: DRAGONSLAYER, LLC
Address 1: 25975 W 143RD PL
Address 2: _____
City: OLATHE State: KS Zip: 66061 + 7554
Contact Person: _____
Phone: (_____) _____ Fax: (_____) _____
Email Address: _____

Well Location:
_____ Sec. 29 Twp. 14 S. R. 22 ☒ East ☐ West
County: JOHNSON
Lease Name: was RED DRAGON OIL now DRAGONSLAYER, LLC Well #: 61

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

**NW1/4 OF SECTION 29, TWP14S, RANGE22E,
JOHNSON COUNTY, KS**

Surface Owner Information:

Name: DRAGONSLAYER, LLC
Address 1: 25975 W 143RD PL
Address 2: _____
City: OLATHE State: KS Zip: 66061 + 7554

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: FEBRUARY 1, 2016 Signature of Operator or Agent: [Signature] Title: MANAGING MEMBER, DRAGONSLAYER, LLC

KCC WICHITA
FEB 03 2016
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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

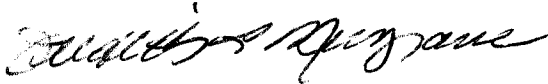
Dear Sir or Ma'am:

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
Dragonslayer, LLC

KCC WICHITA
FEB 03 2016
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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:

- ☐ Oil Lease: No. of Oil Wells _____ **
- ☒ Gas Lease: No. of Gas Wells 181 **
- ☒ Gas Gathering System: SemGas Gathering LLC
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: _____

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

Effective Date of Transfer: 12/1/2015

KS Dept of Revenue Lease No.: SemGas Gathering

Lease Name: SemGas Gathering LLC

_____-_____-_____-Sec. ____Twp. 19 R. 16 ☐ E ☐ W

Legal Description of Lease: to 28 21

County: Rush, Barton, Stafford, Pawnee, Edwards, Kiowa, Ford

Production Zone(s): _____

Injection Zone(s): _____

**KCC WICHITA
JAN 28 2016
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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 ☐ Drilling

Past Operator's License No. 33647

Contact Person: Karol Augustine

Past Operator's Name & Address: SemGas

Phone: 918-524-8374

6210 S Yale Ave., suite 700, Tulsa OK 74136

Date: 1/22/16

Title: Wayne Ziegler, Vice President

Signature: Wayne Ziegler

New Operator's License No. _____

Contact Person: Traci Sunstrum

New Operator's Name & Address: IACX Gathering LLC

Phone: 972-960-3210

5400 LBJ Fwy., suite 460, Dallas, TX 75240

Oil / Gas Purchaser: _____

Date: 1/22/16

Title: Cody Compton, CFO

Signature: Cody Compton

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____

Authorized Signature

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

Date: _____

Authorized Signature

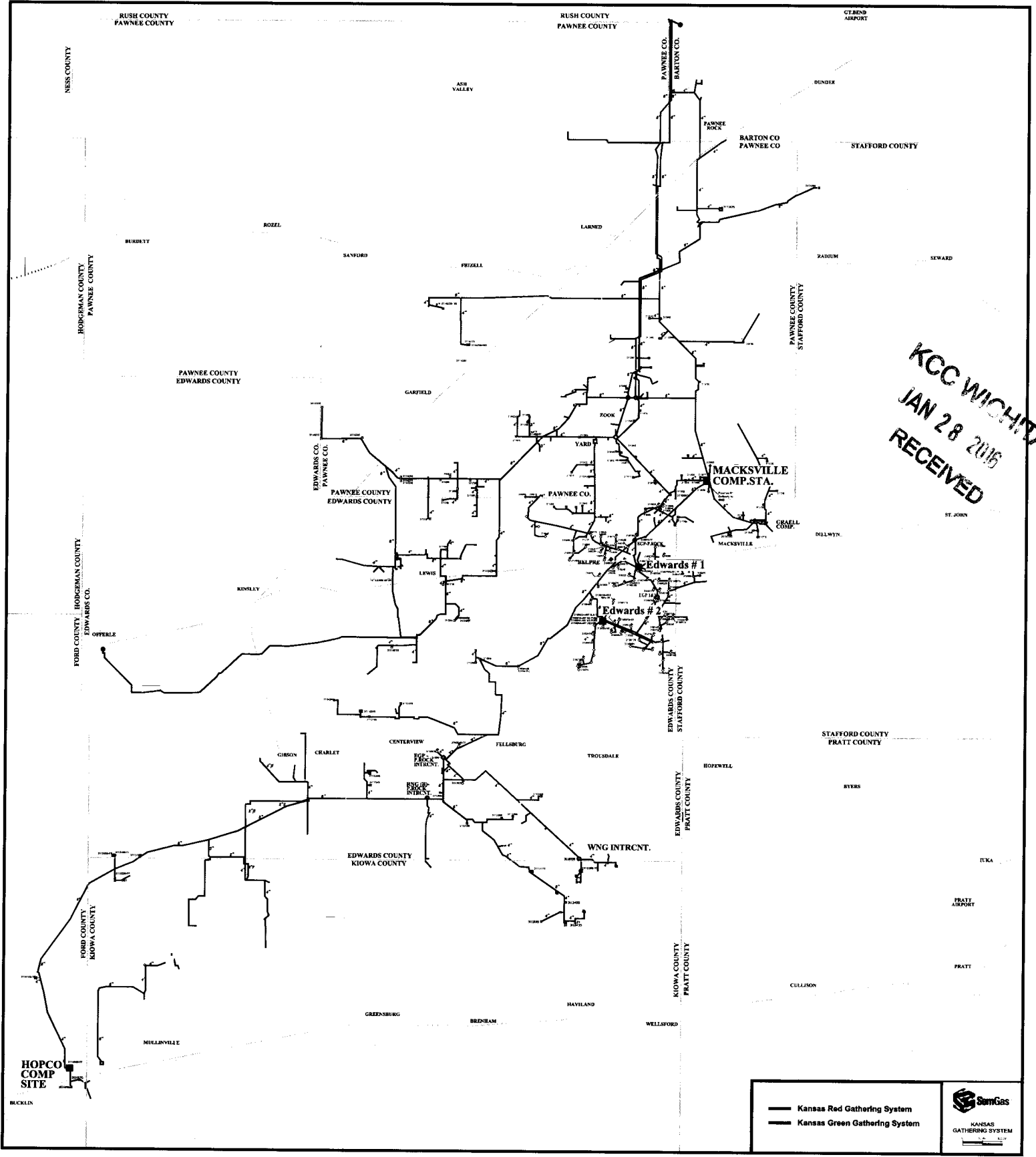
DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____

Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: SemGas Gathering LLC * Location: _____

[illegible]

* 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.



KCC WICHITA
JAN 28 2016
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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:

- ☐ Oil Lease: No. of Oil Wells _____ **
- ☒ Gas Lease: No. of Gas Wells 1 **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: _____

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

Effective Date of Transfer: 1-1-2016

KS Dept of Revenue Lease No.: 204772

Lease Name: GC Bernger

Sec. 17 Twp. 28 R. 16 ☐ E ☒ W

Legal Description of Lease: SW/4 SW/4

County: Kiowa

Production Zone(s): Viola Limestone

Injection Zone(s): _____

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JAN 28 2016
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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 ☐ Drilling

Past Operator's License No. 34347

Contact Person: Jerry Nash

Past Operator's Name & Address: Benchmark Energy LLC

Phone: 316-617-1147

PO Box 8747 Pratt KS 67124

Date: 1/26/16

Title: Manager

Signature: _____

New Operator's License No. 31629

Contact Person: Jerry Nash

New Operator's Name & Address: Nash Oil & Gas Inc

Phone: 316-617-1147

PO Box 8747 Pratt KS 67124

Oil / Gas Purchaser: Kansas Gas Services

Date: 1/26/16

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 above injection well(s) or pit permit.

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

Date: _____

Authorized Signature

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

Date: _____

Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

Must Be Filed For All Wells

* Location: SW/4 SW/4 17-28-16W

KCC WICHITA
JAN 28 2016
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.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 31629
Name: Nash Oil & Gas Inc
Address 1: PO Box 8747
Address 2: _____
City: Pratt State: KS Zip: 67124 + _____
Contact Person: Jerry Nash
Phone: (316) 617-1147 Fax: (620) 672-5280
Email Address: lferrell@profsecservices.com

Well Location:
SW/4 SW/4 - - Sec. 17 Twp. 28 S. R. 16 ☐ East ☒ West
County: Kiowa
Lease Name: GC Bergner Well #: 1

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

KCC WICHITA
JAN 28 2016
RECEIVED

Surface Owner Information:

Name: Mary Frances Bergner, Trustee
Address 1: John Charles Bergner Marital Trust
Address 2: 307 N Ninnescah Street
City: Pratt State: KS Zip: 67124 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1/26/16 Signature of Operator or Agent: [Signature] Title: President

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:

☐ Oil Lease: No. of Oil Wells _____ **
☒ Gas Lease: No. of Gas Wells 1 **
☐ Gas Gathering System: _____
☐ Saltwater Disposal Well - Permit No.: _____
Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: none
Entire Project: ☐ Yes ☒ No
Number of Injection Wells 0 **

Field Name: Chase-Silica

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

Effective Date of Transfer: July 1 2002

KS Dept of Revenue Lease No.: _____

Lease Name: Hathaway

N/2 NW NW Sec. 34 Twp. 19 R. 10 ☐ EX ☒ W

Legal Description of Lease: NW/4 34-19s-10w

County: Rice

Production Zone(s): Winfield

Injection Zone(s): none

**KCC WICHITA
JAN 28 2015
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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 ☐ Drilling

Past Operator's License No. 32081 expired

Contact Person: George Saling

Past Operator's Name & Address: Smokey Valley Resources

Phone: 620 204 1816

212 E Sunderland Chase ks 67524

Date: 7-1-2002

Title: Pres.

Signature: see assignment of lease

New Operator's License No. 30886

Contact Person: John Thomas

New Operator's Name & Address: Vamco Operations

Phone: 620-793-2604

265 ave K Chase ks 67524

Oil / Gas Purchaser: American Energies

Title: owner

Date: 7-1-2002

Signature: John Thomas

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____
Authorized Signature

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

Date: _____
Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

KDOR Lease No.: 1050070705

N/2 NW NW T19S R10W Sec 34

* Location: _____

Well Status
(PROD/TA'D/Abandoned)
XX

Circle
FELYFWL

_FEL/FWL

FEL/FWL

_FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

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FEL/FWL

_FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

FEL/FWL

KCC WICHITA
JAN 28 2016
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.

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:

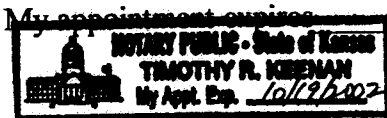
And for the same consideration, the Assignor covenants with the Assignee, its heirs, successors or assigns: That the Assignor is the lawful owner of and has good title to the interest above assigned in and to said lease, estate, rights and property, free and clear from all liens, encumbrances or adverse 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 ^{31st} day of July, 2002, by:

George Saling
George Saling



Timothy R. Keenan
Notary

KCC WICHITA
JAN 28 2016
RECEIVED

Document #: 200401397

STATE OF KANSAS
COUNTY OF RICE

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

Rhonda Hunt
Rice Co., Register of Deeds

00112

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1

July 2014

Form Must Be Typed

Form must be Signed

All blanks must be Filled

*This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent);
T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).
Any such form submitted without an accompanying Form KSONA-1 will be returned.*

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

30886
OPERATOR: License # _____
Name: Vamco Operations
Address 1: 265 Ave K
Address 2: _____
City: Chase State: KS Zip: 67524 + _____
Contact Person: John Thomas
Phone: (620) 793 2604 Fax: (_____) _____
Email Address: _____

Well Location:
N/2 NWNW Sec. 34 Twp. 19 S. R. 10 ☐ East ☒ West
County: Rice
Lease Name: Hathaway Well #: 1

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

KCC WICHITA

JAN 28 2015

RECEIVED

Surface Owner Information:

Name: Hathaway Family Trust
Address 1: 422 Ave L
Address 2: _____
City: Chase State: KS Zip: 67524 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 12-28-2015 Signature of Operator or Agent: John Thomas Title: Owner
John Thomas

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:

- ☒ Oil Lease: No. of Oil Wells 1 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☐ Saltwater Disposal Well - Permit No.: _____
Spot Location: 1632 feet from ☒ N / ☐ S Line
1564 feet from ☐ E / ☒ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: _____

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

Effective Date of Transfer: January 1, 2016

KS Dept of Revenue Lease No.: 145955

Lease Name: Busenitz

NW NW SE NW Sec. 24 Twp. 24 R. 4 ☒ E ☐ W

Legal Description of Lease: SW/4 & N/2 24-24-4E

County: BUTLER

Production Zone(s): 2620

Injection Zone(s): _____

KCC WICHITA
JAN 28 2016
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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 ☐ Drilling

Past Operator's License No. 31389

Past Operator's Name & Address: Noble Petroleum, Inc.
8918 W 21st St N., #200-304 Wichita, KS 67201

Title: President

Contact Person: Jay Ablah

Phone: 316-636-5155

Date: 1/1/2016

Signature: _____

New Operator's License No. 32701

New Operator's Name & Address: C & G DRILLING COMP/
701 E. RIVER EUREKA, KS. 67045

Title: pres.

Contact Person: Tim Gulick

Phone: 620-583-5318

Oil / Gas Purchaser: Coffeyville

Date: 1-1-2016

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

Date: _____
Authorized Signature

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

Date: _____
Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

KDOR Lease No.:

* Location: **24-24-4E**

KCC WICHITA
JAN 28 2016
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

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 32701
Name: C & G Drilling Company
Address 1: 701 E River
Address 2: _____
City: Eureka State: KS Zip: 67045 + _____
Contact Person: Tim Gulick
Phone: (620) 583 Fax: (5318) _____
Email Address: _____

Well Location:
NW NW SE NW Sec. 24 Twp. 24 S. R. 4 ☒ East ☐ West
County: Butler
Lease Name: Busenitz Well #: 1

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
SW/4 & N/2 Sec. 24-24-4E

KCC WICHITA
JAN 28 2016
RECEIVED

Surface Owner Information:

Name: William L. Busenitz
Address 1: 8831 NW Hopkins Switch Road
Address 2: _____
City: Potwin State: KS Zip: 67123 + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-11-16 Signature of Operator or Agent: _____ Title: pres.

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:

- ☒ Oil Lease: No. of Oil Wells 4 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☐ Saltwater Disposal Well - Permit No.: _____
Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
☒ Enhanced Recovery Project Permit No.: E25518
Entire Project: ☐ Yes ☐ No
Number of Injection Wells 2 **

Field Name: Ung
**** Side Two Must Be Completed.**

Effective Date of Transfer: ~~December 1, 2015~~ February 1, 2016

KS Dept of Revenue Lease No.: 129113

Lease Name: UNG UNIT

_____ Sec. _____ Twp. _____ R. ☐ E ☐ W

Legal Description of Lease: SE OF 26, SW OF 25, E/2 OF 35, W/2 NE
OF 36, ALL IN 2S-30W

County: DECATUR

Production Zone(s): LKC A,B,C,D

Injection Zone(s): LKC A,C,D

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 ☐ Drilling

Past Operator's License No. 30606

Contact Person: Leon Rodak

Past Operator's Name & Address: MURFIN DRILLING COMPANY INC
250 N. WATER ST., STE 300 WICHITA, KS 67202

Phone: 316-267-3241

Title: VP Production

Date: 1/21/2016

Signature: [Signature]

New Operator's License No. 4419

Contact Person: DICK SCHREMMER

New Operator's Name & Address: BEAR PETROLEUM LLC
P.O. BOX 438 HAYSVILLE, KS 67060-0438

Phone: 316-524-1225

Title: PRESIDENT

Oil / Gas Purchaser: _____

Date: 2-1-16

Signature: [Signature]

KCC WICHITA
FEB 02 2016
RECEIVED

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

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

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1

July 2014

Form Must Be Typed
Form must be Signed
All blanks must be Filled

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 30606
Name: MURFIN DRILLING COMPANY INC
Address 1: 250 N. WATER ST., STE 300
Address 2: _____
City: WICHITA State: KS Zip: 67202 + 3018
Contact Person: _____
Phone: (316) 267-3241 Fax: (316) 267-6004
Email Address: _____

Well Location: _____
_____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West
County: DECATUR
Lease Name: UNG UNIT Well #: _____

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

KCC WICHITA
FEB 02 2016
RECEIVED

Surface Owner Information:

Name: See Attached
Address 1: _____
Address 2: _____
City: _____ State: _____ Zip: _____ + _____

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

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I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1/21/16 Signature of Operator or Agent: [Signature] Title: VP Production

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 02 2016
RECEIVED

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:

- ☒ Oil Lease: No. of Oil Wells 4 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: E26475 plugged 8/4/03
- Spot Location: 1300 feet from ☐ N / ☒ S Line
- 1400 feet from ☒ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: _____

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

Effective Date of Transfer: 1-29-2016

KS Dept of Revenue Lease No.: 117833

Lease Name: Freeman

Sec. 17 Twp. 31 R. 12 ☒ E ☐ W

Legal Description of Lease: SW1/4 of SE4, N1/2 of SE1/4, S1/2 of NE1/4

N1/2 NE 20-31-12E

County: Elk

Production Zone(s): Layton

Injection Zone(s): Layton

KCC WICHITA
FEB 02 2016
RECEIVED

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 ☐ Drilling

Past Operator's License No. 32526

Contact Person: Brad Linder

Past Operator's Name & Address: B&H Drilling, 1227 Trail Road
Moline, KS 67353

Phone: (316) 737-1471

Title: operator

Date: 1-29-2016

Signature: Brad Linder

New Operator's License No. 33761

Contact Person: Bud Kill

New Operator's Name & Address: K&A Oil, PO Box 4, Longton, KS
67352

Phone: (620) 642-7005

Title: operator

Oil / Gas Purchaser: Pacer

Date: 1-29-2016

Signature: Bud Kill

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

Date: _____

Authorized Signature

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

Date: _____

Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 33761
Name: K&A Oil
Address 1: PO Box 4
Address 2: _____
City: Longton State: KS Zip: 67352 + _____
Contact Person: Bud Kill
Phone: (620) 642-7005 Fax: (_____) _____
Email Address: buderin@sktc.net

Well Location: _____
_____ Sec. 17/20 Twp. 31 S. R. 12 ☒ East ☐ West
County: Elk
Lease Name: Freeman Well #: _____

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

SW/4 of SE/4, N/2 of SE/4, S/2 of NE/4

N2NE-20-31-12E

KCC WICHITA

FEB 02 2016

RECEIVED

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.

Surface Owner Information:

Name: Ed Markel
Address 1: PO Box 274
Address 2: _____
City: Pretty Prairie State: KS Zip: 67570 + _____

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 1-28-16 Signature of Operator or Agent: [Signature] Title: Operator

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:

- ☒ Oil Lease: No. of Oil Wells 1 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☐ Saltwater Disposal Well - Permit No.: _____
Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: _____

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

Effective Date of Transfer: _____

KS Dept of Revenue Lease No.: 133531

Lease Name: Black

Sec 20 Twp 20 R 35 ☐ E ☒ W

Legal Description of Lease: W 2 sec 20 20S 35W

County: Wichita Co.

Production Zone(s) Amazon Ditch

Injection Zone(s): _____

Surface Pit Permit No.: 15 20320195 0000
(API No. if Drill Pit, WO or Haul)

1240 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. 34931

Contact Person: Mark Heath

Past Operator's Name & Address: Mark Heath

Phone: 620 874 5001

1421 S. Co Rd. 21 Leoti KS

Date: Feb 3 2016

Title: owner operator 67861

Signature: Mark Heath

New Operator's License No. _____

Contact Person: Mark Heath

New Operator's Name & Address: Mark Heath

Phone: 620 874 5001

1421 S. Co Rd 21

Oil / Gas Purchaser: _____

Leoti KS 67861

Date: Feb 3 2016

Title: owner operator

Signature: Mark Heath

KCC WICHITA
FEB 03 2016
RECEIVED

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 15 20320195 0000 has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

_____ is acknowledged as

the new operator and may continue to inject fluids as authorized by

Permit No.: _____ . Recommended action: _____

Date: _____

Authorized Signature

_____ is acknowledged as

the new operator of the above named lease containing the surface pit

permitted by No.: _____ .

Date: _____

Authorized Signature

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

* Lease Name: _____ * Location: _____

[illegible]

KCC WICHITA
FEB 03 2016
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.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form KSONA-1

July 2014

Form Must Be Typed

Form must be Signed

All blanks must be Filled

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # _____

Name: Mark Heath Operating

Address 1: 1424 S Co Rd 21

Address 2: _____

City: Leoti State: KS Zip: 67861

Contact Person: Mark Heath

Phone: (620) 8745001 Fax: (____) _____

Email Address: fatboy@wbsnet.org

Well Location: #1 - CNE NE NW

Sec 20 Twp 20 S. R. 35 ☐ East ☒ West

County: _____

Lease Name: Brack Well #: 1

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

KCC WICHITA

FEB 03 2016

RECEIVED

Surface Owner Information:

Name: Ferri Brack / Daniel & Morris Brackler

Address 1: 1415 S. Co Rd 21 / 906 Colledge St

Address 2: Leoti KS 67861 Scott City KS

City: _____ State: _____ Zip: _____ + 67271

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If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: Feb 3 2016 Signature of Operator or Agent: Mark Heath Title: operator

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:

- ☒ Oil Lease: No. of Oil Wells 1 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: _____

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

Effective Date of Transfer: 10/31/2014

KS Dept of Revenue Lease No.: 15185002780001

Lease Name: GILES OWWO

NE - SE - SE - Sec. 34 Twp. 24 R. 15 ☐ E ☒ W

Legal Description of Lease: NE NE SE 34-24-15

County: STAFFORD

Production Zone(s): _____

Injection Zone(s): _____

Surface Pit Permit No.: 15185002780001
(API No. if Drill Pit, WO or Haul)

990 feet from ☐ N / ☒ S Line of Section

330 feet from ☒ E / ☐ W Line of Section

Type of Pit: ☒ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ Drilling

Past Operator's License No. 34565

Contact Person: RONALD LANDWEHR

Past Operator's Name & Address: 5R LLC ; 10265 SE WALSTEAD
SHARON, KS 67138

Phone: 620-294-5486

Date: 10/31/2014

Title: OWNER

Signature: Ronald Landwehr

KCC WICHITA

FEB 03 2015

RECEIVED

New Operator's License No. 35194

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

Title: OWNER

Signature: John Royer

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 15185002780001 has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit.

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

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

DISTRICT _____ EPR _____ PRODUCTION _____ UIC _____
Mail to: Past Operator _____ New Operator _____ District _____

* Location: STAFFORD COUNTY

KCC WICHITA
FEB 03 2016
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.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

**CERTIFICATION OF COMPLIANCE WITH THE
KANSAS SURFACE OWNER NOTIFICATION ACT**

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

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application). Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 35194
Name: JOHN ROYER
Address 1: 1905 6TH ROAD
Address 2: _____
City: RAYMOND State: KS Zip: 67573 + _____
Contact Person: JOHN ROYER
Phone: (620) 727-3591 Fax: (_____) _____
Email Address: KSHORSE_MASTER@YAHOO.COM

Well Location:
NE SE SE Sec. 34 Twp. 24 S. R. 15 ☐ East ☒ West
County: STAFFORD
Lease Name: GILES OWWO Well #: 1

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

Surface Owner Information:

Name: ALEXANDER & BERNICE GILES TR #1
Address 1: 401 ROCHESTER ST
Address 2: APT 114
City: PRATT State: KS Zip: 67124 + _____

KCC WICHITA

FEB 03 2016

RECEIVED

When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

- ☐ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.
- ☒ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 10-31-2014 Signature of Operator or Agent: x John Royer Title: OWNER/OPERATOR

**KSONA FEE
PAID**