KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 123115_Freeman.pdf

July 2014 Form must be Typed Form must be Signed All blanks must be Filled

Form T-1

REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,
MUST be submitted with this form

Check Applicable Boxes: MUST be s	submitted with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:12/31/2015		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 112609		
Gas Gathering System:	Lease Name: FREEMAN		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease: SE/4		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: BUTLER		
Number of Injection Wells**	Production Zone(s):_BARTLESVILLE		
Field Name: HAVERHILL	DADTI FOLKILE		
** Side Two Must Be Completed.	Injection Zone(s): BARTLESVILLE		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover of Drilling		
Past Operator's License No. 32843 /			
	Contact Person: DENNIS L. BUTLER		
Past Operator's Name & Address: LED ENTERPRISE, LLC	Phone: 316-323-4654		
801 FREDRICK DR. EL DORADO, KS 67010	Date: / S / JO / I		
Title: <u>Co-owner</u>	Signature: Dennis L. Butler KANSAS CORPORATION COMMIS		
New Operator's License No. 30582	Contact Person: MICHAEL W. KISER CONSERVATION DIVISION		
New Operator's Name & Address: MWK PETROLEUM CO.	The state of the s		
508 STONE LAKE CT. AUGUSTA, KS 67010			
	Oil / Gas Purchaser: MACLASKEY OILFIELD SERVICE		
	Date:/a/30/15		
Title: OWNER	Signature: MuhaelW.K		
Acknowledgment of Transfer: The above request for transfer of inje	ection authorization, surface pit permit # has been		
	ration Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in			
is acknowledged	d as is acknowledged as		
the new operator and may continue to inject fluids as authorized			
	pi		
Permit No.: , Recommended action:	permitted by No.:		
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR	PRODUCTION JAN 2 6 2016 UIC 1-26-10		
Mail to: Past Operator New O	District		

Side Two

Must Be Filed For All Wells

* Lease Name:	FREEMAN		* Location:	E 27-27-5E	· · · · · · · · · · · · · · · · · · ·
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)
1A	15015-21246-000	4290 FSL FNL	4290 Circle	OIL	PROD
	-	FSL/FNL	FEL/FWL	-	
W 12-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		FSL/FNL	FEL/FWL		
·		FSL/FNL	FEL/FWL		-
		FSL/FNL	FEL/FWL		• • • • • • • • • • • • • • • • • • • •
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		FSL/FNL	FEL/FWL		
· · · · · · · · · · · · · · · · · · ·		FSL/FNL	FEL/FWL		
P 16		FSL/FNL	FEL/FWL		
		F\$L/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	Receiv KANSAS CORPORATIO	red ON COMMISSION
X1 (A.)		FSL/FNL	FEL/FWL	JAN 0 4	
				CONSERVATION WICHITA	N DIVISION
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		FSL/FNL	FEL/FWL		
77.2.		FSL/FNL	FEL/FWL	44.64441	-
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

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

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 (In	nt) CB-1 (Cathodic Protection Borehole Intent) 🗵 T	-1 (Transfer)		
OPERATOR: License # 30582	Well and			
OPERATOR: License # 30582 Name: MWK PETROLEUM CO. Address 1: MICHAEL W. KISER Address 2: 508 STONE LAKE CT.	Well Location:	well Location:		
Address 1: MICHAEL W. KISER	Sec	County: BUTLER Lease Name: FREEMAN Well #: 1		
Address 2: 508 STONE LAKE CT.	County: 50 - ERFEMAN	1		
City: AUGUSTA State: KS Zip: 67010	Lease Name:	Well #:		
Contact Person: MIKE KISER Phone: (316) 775-5496 Fax: (316) 775 Email Address: HIZEYPIPEGUY@YAHOO.COM Surface Owner Information:	f — — — If filing a Form T-1 for multiple we the lease below:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Phone: (316 \ 775-5496 F , 316 \ 775	498			
Fax: ()				
Email Address:	Received Received			
KANAX	ORPORATIO			
Surface Owner Information:	AN 04 2016			
Name: PENELOPE & JAMES HOWELL Address 1: 1184 SW 110TH ST Address 2:	When filing a Form T-1 involving r	nultiple surface owners, attach an additional		
Address 1: 1184 SW 110TH ST	sheet listing all of the information owner information can be found in	sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the		
Address 2:	county, and in the real estate prop	estate property tax records of the county treasurer.		
City: AUGUSTA State: KS Zip: 67010	·			
the KCC with a plat showing the predicted locations of leare preliminary non-binding estimates. The locations made select one of the following:	e roads, tank batteries, pipelines, and electrica be entered on the Form C-1 plat, Form CB-1 pla	I lines. The locations shown on the plat at, or a separate plat may be submitted.		
I certify that, pursuant to the Kansas Surface Countries of the land upon which the subject we CP-1 that I am filing in connection with this form form; and 3) my operator name, address, phone	s or will be located: 1) a copy of the Form C-1) if the form being filed is a Form C-1 or Form cumber, fax, and email address.	, Form CB-1, Form T-1, or Form CB-1, the plat(s) required by this		
I have not provided this information to the surface KCC will be required to send this information to task, I acknowledge that I must provide the name that I am being charged a \$30.00 handling fee, particularly in the surface of the	e surface owner(s). To mitigate the additional and address of the surface owner by filling out	cost of the KCC performing this the top section of this form and		
If choosing the second option, submit payment of the \$ form and the associated Form C-1, Form CB-1, Form T-	.00 handling fee with this form. If the fee is not or Form CP-1 will be returned.	t received with this form, the KSONA-1		
I hereby certify that the statements made herein are true				
Date: 12/31/15 Signature of Operator or Agent:	Muhaela Kui Title	o: OWNER		