

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 8 \*\*

☐ Gas Lease: No. of Gas Wells \_\_\_\_\_ \*\*

☐ Gas Gathering System: \_\_\_\_\_

☒ Saltwater Disposal Well - Permit No.: D19266.0

Spot Location: 2966 feet from ☐ N / ☒ S Line

1989 feet from ☒ E / ☐ W Line

☐ Enhanced Recovery Project Permit No.: \_\_\_\_\_

Entire Project: ☐ Yes ☐ No

Number of Injection Wells \_\_\_\_\_ \*\*

Field Name: E1 Dorado

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

Effective Date of Transfer: 12/31/2015 \* 01-22-16

\* D.L. Butler 2/5/16

KS Dept of Revenue Lease No.: 134487 ✓

Lease Name: Sigman

Sec. 8 Twp. 26 R. 5 ☒ E ☐ W

Legal Description of Lease: NE/4 ✓

County: Butler ✓

Production Zone(s): Arbuckle

Injection Zone(s): Arbuckle ✓

Surface Pit Permit No.: P02307

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

Added D. Butler 2-24-16.

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

2970 feet from ☐ N / ☒ S Line of Section

1990 feet from ☒ E / ☐ W Line of Section

Past Operator's License No. 32843 ✓

Past Operator's Name & Address: LED Enterprises, LLC

801 Fredrick Dr. Eldorado, Ks. 67042

Title: Co-Owner

Contact Person: Dennis L. Butler

Phone: 316-323-4654

Date: 12/31/2015

Signature: Dennis L. Butler

New Operator's License No. 35293 ✓

New Operator's Name & Address: D & L Oil, LLC

10066 SE Pawnee Rd. LKeon, Ks. 67074

Title: Owner

Contact Person: Dennis L. Butler

Phone: 316-323-4654

Oil / Gas Purchaser: Maclaskey Oilfield Service

Date: 12/31/2015

Signature: Dennis L. Butler

**KCC WICHITA**

**FEB 04 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.

D & L Oil, LLC is acknowledged as

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

Permit No.: D-19266 Recommended action: None

Date: 2-24-16 Cheryl Beyer  
Authorized Signature

D & L Oil, LLC is acknowledged as

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

permitted by No.: P02307

Date: 2-24-16 Olivia Rios  
Authorized Signature

DISTRICT \_\_\_\_\_ EPR 2-24-16 PRODUCTION 2-25-16 UIC 2-24-16

Mail to: Past Operator 2-24-16 New Operator 2-24-16 District 2 2-24-16

\* Location: NE/4 8-26-5E

**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

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Form KSONA-1

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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 # 35293  
Name: D & L oil, LLC  
Address 1: 10066 SE Pawnee Rd.  
Address 2: \_\_\_\_\_  
City: Leon State: Ks. Zip: 67074 + \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Fax: ( \_\_\_\_\_ ) \_\_\_\_\_  
Email Address: \_\_\_\_\_

Well Location:  
\_\_\_\_\_ Sec. 8 Twp. 26 S. R. 5 ☒ East ☐ West  
County: Butler  
Lease Name: Sigman Well #: \_\_\_\_\_

*If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:*  
**NE/4 8-26-5E**

**KCC WICHITA**

**Surface Owner Information:**

Name: Georgia Louise Coffman  
Address 1: 3243 SW 10th Street  
Address 2: \_\_\_\_\_  
City: Eldorado State: Ks. Zip: 67042 + 9059

**FEB 04 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: 12/31/15 Signature of Operator or Agent: Dennis L Butler Title: Co-Owner