## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

020116\_Miller.pdf

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

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

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,

Check Applicable Boxes: MUST be submi	ited with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 2-1-2016		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 107307		
Gas Gathering System:	Lease Name: Miller		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	<u> </u>		
feet from E / W Line	Legal Description of Lease: NE/4 NE/4 SW/4 Sec. 17-32-2E		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: Sumner		
Number of Injection Wells **	Production Zone(s):		
Field Name: Uxtord West	Injection Zone(s):		
** Side Two Must Be Completed.	injustion Zene(s).		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover . OCD Drilling		
Past Operator's License No. 7186	Contact Person: William Docking		
Past Operator's Name & Address: Docking Development Company,	Phone: 620-442-5200		
LLC, PO Box 928, Arkansas City, KS 67005			
	Date: 3-14-2016		
Title: Manager	Signature: Lillian hocky		
New Operator's License No. 35191	Contact Person:		
New Operator's Name & Address: Buffalo Oil & Gas, LLC	FIUNG.		
119 N. Michigan St., PO Box 6, Oxford, KS 67119	Oil / Gas Purchaser: Phillips 66 MAR 1 4 2016		
	Date: 3-14-2916 NECEIVED		
Title: Manager	Signature: With That V		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been		
-	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the			
is acknowledged as	is acknowledged as		
the new operator and may continue to inject fluids as authorized by	the new operator of the above named lease containing the surface pit		
Permit No.: Recommended action:	permitted by No.:		
Date:	Date:		
11 = 12	Authorized Signature		
	PRODUCTION 4-6-16		
Mail to: Past Operator New Operat	tor District		

#### Side Two

### Must Be Filed For All Wells

	No.:107307				
* Lease Name:	Miller		Location: N	NE NE SW Sec. 17-32S-2	E, Sumner Co., KS
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-191-10433-0000	2330 ESL FNL	2937 Circle	Oil	Producing
	-	FSL/FNL	FEL/FWL		And a second control of the control
-		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
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A separate sheet may be attached if necessary

<sup>\*</sup> 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) X T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 7186	Well Leastion:
Name: Docking Development Company, LLC	Well Location:  NE -NE -SW Sec. 17 Twp. 32 S. R. 2 X East West
Address 1: PO Box 928	
Address 2:	B #:11 =
City: Arkansas City State: KS Zip: 67005 +	If files a Form T 1 for multiple wells an along pate the legal description of
Contact Person: William Docking	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Phone: ( 620 ) 442-5200 Fax: ( )	
- 10/10	CHITA
Surface Owner Information: Name: Irons, Bryan & Kendra Address 1: 317 Waterside Dr Address 2:	owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.
the KCC with a plat showing the predicted locations of lease roads, ta	nodic Protection Borehole Intent), you must supply the surface owners and nk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface plocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form to being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.
KCC will be required to send this information to the surface of	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this so of the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 handlin form and the associated Form C-1, Form CB-1, Form T-1, or Form CF	ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.
I hereby certify that the statements made herein are true and correct	· · · · · · · · · · · · · · · · · · ·
Date: 3-14-2016 Signature of Operator or Agent: Well	indaky Title: MANGE