KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

030116_Ficken.pdf Form must be Typed July 2014 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:	inted with this jorn.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 114/2016 3/1/2010		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 138786		
Gas Gathering System:	Lease Name: FICKEN 1-15		
Saltwater Disposal Well - Permit No.:	SENE SE_Sec15_Twp68R26 E \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
Spot Location: feet from N / S Line	·		
feet from E / W Line	Legal Description of Lease: TUS		
Enhanced Recovery Project Permit No.:	103		
Entire Project: Yes No	County: SHERIDAN Production Zone(s): LANSING-KANSAS CITY Injection Zone(s):		
Number of Injection Wells**			
Field Name: VAHLING WEST			
** Side Two Must Be Completed.	injection zone(s).		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover R Drilling		
Past Operator's License No. 8628	Contact Person: KEVIN DONOHUE		
Past Operator's Name & Address: FORESTAR PETROLEUM CORP.	Phone: 720-245-6624		
1801 BROADWAY, SUITE 600, DENVER, CO 80202	Date: Kuin Donopus		
Title: VP-LAND & BUSINESS DEVELOPMENT			
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New Operator's License No. 35300	Contact Person: DEB SMITH MAR 0 3 2016		
New Operator's Name & Address: COACHMAN ENERGY OPERATING COMPANY LP	Phone: 720-476-3678 X209		
C/O CYNOSURE ENERGY, LLC	Oil / Gas Purchaser: COFFEYVILLE RESOURCES WICHITA, KS		
1125 17TH STREET, SUITE 410, DENVER, CO 80202	2/1/4		
	Date:		
Title: CHIEF FINANCIAL OFFICER	Signature: WALLA (-3)		
Acknowledgment of Transfer: The above request for transfer of injection	n authorization, surface pit permit # has been		
noted, approved and duly recorded in the records of the Kansas Corporation	n Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the	e above injection well(s) or pit permit.		
is acknowledged as	is acknowledged as		
the new operator and may continue to inject fluids as authorized by			
Permit No.: Recommended action:	permitted by No.:		
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR	PRODUCTION 3-27-16 UIC 3-27-16		
Mail to: Past Operator New Operator	ator District		

Side Two

Must Be Filed For All Wells

Lease Name:	No.: 138786 FICKEN 1-15		* Location:T	6S R26W, Sec. 15, SE	NE SE
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	15-179-21182 🗸	1755 (FS)/FNL	330 (FEL) FWL	OIL	PRODUCING
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		_
			FEL/F W L		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
			FEL/FWL		
			FEL/FWL		
			FEL/FWL		Received KANSAS CORPORATION COMMISSION
<u> </u>			FEL/FWL		MAR 0 3 2016
		FSL/FNL			CONSERVATION DIVISION
1		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 (Intent) CB-1 (Cathodic Protection Borehole Intent)		
OPERATOR: License # 8628	Well Location:		
Name: FORESTAR PETROLEUM CORPORATION	<u>SE_NE_SE</u> Sec. 15 Twp. 6 S. R. 26 East X West		
Address 1: 1801 BROADWAY, SUITE 600	County: SHERIDAN Lease Name: FICKEN 1-15 Well #: 1 OF 1		
Address 2:	Lease Name: FICKEN 1-15 Well #: 1 OF 1		
City: DENVER State: CO Zip: 80202 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
City: DENVER State: CO Zip: 80202 + Contact Person: KEVIN DONOHUE Phone: (720) 245-6624 Fax: (303) 297-2204	the lease below:		
Phone: (720) 245-6624 Fax: (303) 297-2204			
Email Address: KEVINDONOHUE@FORESTARGROUP.COM			
Surface Owner Information: Name: BRANDT FARMS, INC. Address 1: 6040 AVE 430	When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.		
Address 2:	county, and in the real estate property tax records or the county treasurer.		
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this		
KCC will be required to send this information to the surface ov	technowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.		
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.		
Date: 2/29/16 Signature of Operator or Agent:	Title: VP-LAND BYS. DE		
	Received		

Received KANSAS CORPORATION COMMISSION

MAR 0 3 2016