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 Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 143569 Gas Gathering System:__ Lease Name: RENICK Saltwater Disposal Well - Permit No.: ___ _ NE _ SE _ NE Sec. 29 Twp. 25 R. 29 E V W feet from N / S Line Legal Description of Lease: N/2 OF 29-T25S-R29W & SW/4 OF 29-T25S-R29W feet from E / W Line 29-T25S-R29W Enhanced Recovery Project Permit No.: County: GRAY Entire Project: Yes No Number of Injection Wells ____ ST. LOUIS Production Zone(s): Field Name: INGALLS NONE Injection Zone(s): ** Side Two Must Be Completed. NONE Surface Pit Permit No.: feet from N / S Line of Section (API No. if Drill Pit, WO or Haul) E / W Line of Section Workover Type of Pit: Emergency Burn Settling Haul-Off Drilling BRUCE D. KELSO Past Operator's License No. Contact Person: Phone: 620-259-4000 LASSO ENERGY, LLC Past Operator's Name & Address: **APRIL 18, 2016** 1125 SOUTH MAIN, P.O. BOX 465, CHASE, KS 67524-0465 Title: PRESIDENT Signature: BRUCE D. KELSO New Operator's License No. Contact Person: KANSAS CORPORATION COMMISSION Phone: 620-282-9233 New Operator's Name & Address: OPCO, LLC APR 28 2016 1119 SOUTH MAIN Oil / Gas Purchaser: CHS Date: APRIL 18, 2016 CHASE, KS 67524 CONSERVATION DIVISION PRESIDENT NONE Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #_ 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 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:_ Authorized Signature Authorized Signature PRODUCTION DISTRICT

Mail to: Past Operator

Side Two

Must Be Filed For All Wells

143569 KDOR Lease No.: RENICK 29-T25S-R29W * Lease Name: * Location: API No. (YR DRLD/PRE '67) Well No. Footage from Section Line Type of Well Well Status (Oil/Gas/INJ/WSW) (PROD/TA'D/Abandoned) (i.e. FSL = Feet from South Line) Circle (FS)/FNL 15-069-20446-0000 V 1 3606 347 OIL **PRODUCING** FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FSL/FNL FEL/FWL Recoived KANSAS-CORPORATION COMMISSION

FSL/FNL

FEL/FWL

APR 28 2016

CONSERVATION DIVISION WICHITA, KS

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.

9E237	
OPERATOR: License # 35322	Well Location:
Name: OPCO, LLC	NE_SE_NE_Sec. 29 Twp. 25 S. R. 29 East Wes
Address 1: 1119 SOUTH MAIN	
Address 2:	Lease Name: RENICK Well #: 1
City: CHASE State: KS Zip: 67524 + 0000 Contact Person: BRUCE D. KELSO	If filing a Form T-1 for multiple wells on a lease, enter the legal description the lease below:
Phone: (620) 282-9233 Fax: (620) 938-2945	VEQ COMMISSION
Contact Person: BRUCE D. KELSO Phone: (620) 282-9233	8 2016
Surface Owner Information: Name: W.R. RENICK INC. ATTN: DAVE REYNOLDS CONSERV Address 1: 6514 US HIGHWAY 50	ATION DIVISION
Name: W.R. RENICK INC. ATTN: DAVE REYNOLDS CONSERV	CHITA, NO CHITA, NO When filing a Form T-1 involving multiple surface owners, attach an addition
Address 1: 6514 US HIGHWAY 50	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 property tax records of the county treasurer.
City: INGALLS State: KS Zip: 67845 + 0000	
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 CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax,	
I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the forr form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface.	e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form in being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this as of the surface owner by filling out the top section of this form and
I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addrest that I am being charged a \$30.00 handling fee, payable to the	e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form in being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this is so the surface owner by filling out the top section of this form and e KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-
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 ✓ I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, ✓ I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I must provide the name and addret that I am being charged a \$30.00 handling fee, payable to the lift 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 CB-1. 	e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form in being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this as of the surface owner by filling out the top section of this form and a KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-P-1 will be returned.