050116_Schreiber_A.pdf

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: Effective Date of Transfer: __05-01-2016 Oil Lease: No. of Oil Wells _ Gas Lease: No. of Gas Wells ___ KS Dept of Revenue Lease No.: 30568 Gas Gathering System: Lease Name: Schreiber A Saltwater Disposal Well - Permit No.: ___ _SW _ NE _ SE Sec. 25 Twp. 15 R. 13 E W feet from N / S Line Spot Location: _ Legal Description of Lease: SE/4 Sec 25-15-13W feet from | E / | W Line Enhanced Recovery Project Permit No.: __ County: Russell Entire Project: Yes No Number of Injection Wells _ Production Zone(s): LKC / Arbuckle Field Name: Trapp Injection Zone(s):_ ** Side Two Must Be Completed. N / S Line of Section Surface Pit Permit No.: _ feet from (API No. if Drill Pit, WO or Haul) W Line of Section Type of Pit: Haul-Off Emergency Richard L. Schreiber Past Operator's License No. Contact Person: MAY 3 1 2016 Past Operator's Name & Address: ______Mary Ann Schreiber Estate/Schreiber Oil Co Phone: 620-587-3224 Date: 05-03-2016 RECEIVED 598 2nd Ave, Beaver, KS 67525 Title: Executor Received KANSAS CORPORATION COMMISSION New Operator's License No. 31086 🗸 Contact Person: Richard L. Schreiber MAY 0 9 2016 Phone: 620-587-3224 New Operator's Name & Address: Richlan Drilling CONSERVATION DIVISION 598 2nd Ave, Beaver, KS 67525 Oil / Gas Purchaser: _CHS WICHITA, KS Date: 05-03-2016 Title: Owner 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 of the above named lease containing the surface pit the new operator and may continue to inject fluids as authorized by . Recommended action: permitted by No.: ___ Authorized Signature Authorized Signature DISTRICT . Mail to: Past Operator_ District **New Operator**

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 30568				
	- · · · ·		* Location:	SE/4 Sec 25-15	-13W
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	15-167-22979-0000	1650 ESLYFNL	990 Circle FEL FWL	Oil	Prod
2	15-167-23056-0000	1980 FSL/FNL	990 FELYFWL	Oil	Prod
3	15-167-23089-0000	1980 FSLYFNL	1650 FEL/FWL	Oil	Prod
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
AMERICAN ACCUSATION AND A STATE OF THE STATE		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		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 (Intent) CB-1	(Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
31086			
OPERATOR: License # 31086 Name: Richlan Drilling	Well Location:		
	SW_NE_SE_Sec. 25 Twp. 15 S. R. 13 East west		
Address 1: 598 2nd Ave	County: Russell		
Address 2:	Lease Name: Schreiber A Well #: 1		
State: KS Zip: 67525 +	· · · · · · · · · · · · · · · · · · ·		
Contact Person: Richard L. Schreiber	the lease below: SE/4 Sec 25-15-13W		
Phone: (620) 587-3224 Fax: (620) 587-3229			
Email Address: Schreiberrj@hbcomm.net	ad Commission		
KANSAS CON	2016		
· W	₹ ₽ -		
Name: Schreiber Farms LLC	DIVISION KS 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		
Address 1: 598 2nd Ave CONSWICH			
Address 2:	county, and in the real estate property tax records of the county treasurer.		
City: Beaver State: KS Zip: 67525 +			
are preliminary non-binding estimates. The locations may be entered Select one of the following:	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,	Act (House Bill 2032), I have provided the following to the surface located: 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. acknowledge that, because I have not provided this information, the		
KCC will be required to send this information to the surface of	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		
lf 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	g fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.		
	KCC WICHIT		
I hereby certify that the statements made herein are true and correct	//// // // saay 2.1.2016		
Date: 5-3-16 Signature of Operator or Agent: Riskin	ul O Mull zitle:		
	RECEIVED		