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: JAN 1, 2016 Gas Lease: No. of Gas Wells _ KS Dept of Revenue Lease No.: __104134 ___ Gas Gathering System: Lease Name: Saltwater Disposal Well - Permit No.: __ _____ <u>SW Sec. 21 Twp. 198 R. 1</u> EV W _____feet from N / S Line Legal Description of Lease: SW Section 21- T19S - R1W feet from E / W Line Enhanced Recovery Project Permit No.: Entire Project: Yes No McPherson County: __ Number of Injection Wells Production Zone(s): Mississippi Chat Ritz-Canton Field Name: _ Injection Zone(s):_ ** Side Two Must Be Completed. Surface Pit Permit No.: _ feet from N / S Line of Section (API No. if Drill Pit, WO or Haul) feet from W Line of Section Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling Past Operator's License No. Thomas H. Oast Contact Person: S & S Oil and Gas, LLC Past Operator's Name & Address: Phone: 620-725-3200 Date: ___ July 8, 2016 P. O. Box 659 - Skiatook, OK 74070 Title: Owner Signature: KANSAS CORPORATION COMMISSION Contact Person: _Thomas H. Oast New Operator's License No. . New Operator's Name & Address: SM Oil & Gas, Inc. Phone: 620-725-3200 P. O. Box 189 Sequoyah Trading & Transportation, OQNSERVATION DIVISION Oil / Gas Purchaser: Skiatook, OK 74070 Date:_July 8, 2016 Title: Owner Signature: 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 the new operator and may continue to inject fluids as authorized by the new operator of the above named lease containing the surface pit _____. Recommended action: permitted by No.: _ Authorized Signature DISTRICT _ Mail to: Past Operator **New Operator** District

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 104134				
* Lease Name:	Shaw		* Location: S	W Section 21 - 19S -	R1W
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	15-113-19217	2310 FSL/FNL	4950 Circle	Oil	Producing
4	15-113-05670	2310 FSL/FNL	3630 (FEL)FWL	Oil	TA'D
6	15-113-02385	375 FSD FNL	3585 FWL	Oil	Producing
		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 _		
11-8cha		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL _		Received NSAS CORPORATION COMMISSION
		FSL/FNL	FEL/FWL		JUL 1 2 2016
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION
		FSL/FNL	FEL/FWL _		WICHITA, KS
		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 correspond	onding form being filed:	C-1 (Intent) CB-1 (C	cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License	_{e #} 35116		Wall I postion.			
	Gas, Inc.		Well Location:	19 - 1		
Address 1: P. O. Bo	ox 189		County: McPherson	p. <u>19</u> S. R. <u>1</u> East X West		
			Lease Name: Shaw	Multiple		
City: Skiatook	State: OK Zip: 74	4070 _				
Contact Person: Thomas H. Oast Phone: (620) 725-3200 Fax: (620) 725-3211			If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Phone: (620) 72	25-3200 _{Fax: (} 620	725-3211	SW Section 21 - T19S -	R1W		
Email Address:		Received Received Received Received Received RANSAS CORPORATION COM	ussion			
	4	Received COM	· C			
Surface Owner Inform	mation:	KANSAS CORPORATION E	7/0			
Name: Bandy 1	Trust	JUL 12	INISION			
	uth Park Avenue	CONSERVATION,	sheet listing all of the information to	riple surface owners, attach an additional the left for each surface owner. Surface		
Address 2:		0- 11-	Control information can be lound in the	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.		
	State: KS Zip: 67		tours, and in the real estate property	viax records or the county treasurer.		
are preliminary non-less are preliminary non-less select one of the foliation of the foliation of the CP-1 that I are form; and 3).	binding estimates. The location binding estimates. The location bwing: pursuant to the Kansas Surfice land upon which the subject milling in connection with this my operator name, address, provided this information to the strequired to send this information.	face Owner Notice Acted well is or will be local sorm; 2) if the form be obner number, fax, and surface owner(s). I acted to to the surface owner ion to the surface owner ion to the surface owner ion to the surface owner.	the Form C-1 plat, Form CB-1 plat, of t (House Bill 2032), I have provided tated: 1) a copy of the Form C-1, For plang filed is a Form C-1 or Form CR-	es. The locations shown on the plater a separate plat may be submitted. If the following to the surface form CB-1, Form T-1, or Form 1, the plat(s) required by this		
If choosing the secon	ig charged a \$50.00 handling	the \$30.00 handling fe	cc, which is enclosed with this form.			
I hereby certify that the July 8, 2016 Date:			ne best of my knowledge and belief.	rea Manager		