040116_Schnackenberg_2_11.pdf
KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

July 2014 Form must be Typed Form must be Signed All blanks must be Filled

Form T-1

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:	itted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 4/1/2016
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: Oll: 144596 Gas: 233799
Gas Gathering System:	Lease Name: Schnackenberg A
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease: W2 W2
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Harper
Number of Injection Wells**	Production Zone(s): Mississippi
Field Name: Wharton	
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	feet from N / S Line of Section feet from E / W Line of Section Haul-Off Workover Drilling
Type of the	
Past Operator's License No. 34192	Contact Person:
Past Operator's Name & Address: SandRidge Exploration and Production LLC	Phone: 405-429-5500
123 Robert S Kerr Avenue., Oklahoma City, OK 73102	Date: 4-13-(C MAY 1 6 2016
Title: SVP Mid Continent	Signature: RECEIVED
	Contact Person: L. Roger Hutson
New Operator's License No. 35247	
New Operator's Name & Address: HRM Resources II, LLC	Phone: 303-893-6621
410 17th Street, Suite 1600	Oil Gas Purchaser:
Denver CO 80202	Date: 4/15/2014
Title: President and CEO	Signature: / WWW
Acknowledgment of Transfer: The above request for transfer of injection	on authorization, surface pit permit # has been
noted approved and duly recorded in the records of the Kansas Corporation	on Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the	
Commission records only and does not convey any embersion	
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:	
	- Date:
Date:	Date:Authorized Signature
Q 10.1/	PRODUCTION 8-11-6 UIC 11 2016
DISTRICTEFN	eratorDistrict

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: Oll: 144596 Gas: 2337	799			
* Lease Name: ₋	Schnackenberg A		* Location:	Section 11-34S-08W	
Well No.	API No. (YR DRLD/PRE '67)	Footage from S (i.e. FSL = Feet fro	Section Line om South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
2-11	15-077-21996-0000	Circle 1650-FSL FSL FN	990 FWL FEL FWL	Oil & Gas	TA'D
		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		
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		FSL/FNL	FEL/FWL		
-		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		F\$L/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	KCC	WICHITA
			FEL/FWL		1 6 2016
			FEL/FWL	R	ECEIVED
		FSL/FNL	FEL/FWL		
			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.

OPERATOR: License # 35247	Well Location:		
Name: HRM Resources II, LLC	NE_SW_NW Sec. 11 Twp. 34 S. R. 08 East X West		
Address 1: 410 17th Street, Suite 1600	County: Harper		
Address 2:	County: Harper Lease Name: Schnackenberg A Well #: 2-11		
City: Denver State: CO Zip: 80202 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Porson: L. Roger Hutson	the lease below:		
Phone: (_303_) 893-6621 Fax: () Email Address: Surface Owner Information: Name: Schnackenberg Family Farm, LLC	TA		
Email Address:	His.		
KC _C 4.	2016		
1 Yaw	SEVED 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		
Surface Owner Information: Name: Schnackenberg Family Farm, LLC	SEIVED When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: 20 Clifford Street	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:	•		
City: State zip			
are preliminary non-binding estimates. The locations may be entered	nk batteries, pipelines, and electrical lines. The locations shown on the plat		
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). If the required to send this information to the surface.	Act (House Bill 2032), I have provided the following to the surface elocated: 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		