KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1 March 2010 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 .: 114974 Cloyd Llyoyd Kebert Gas Gathering System: Lease Name: Saltwater Disposal Well - Permit No.: _ - NW Sec. 10 Twp. 30 R. 15 feet from Legal Description of Lease: NW/4 of the Sec.10 Twp.30 R.15E feet from E/ W Line Enhanced Recovery Project Permit No.: Entire Project: ✓ Yes No Wilson County: _ Number of Injection Wells Bartlesville Production Zone(s): Neodesha Field Name: _ Bartlesville Injection Zone(s):_ ** Side Two Must Be Completed. Surface Pit Permit No.: S Line of Section (API No. if Drill Pit, WO or Haul) W Line of Section Type of Pit: Settling Emergency Burn Haul-Off Workover 5409 (Deceased) Bryan Marshall Past Operator's License No. Contact Person Marshall, Lew L. 620-750-0058 Past Operator's Name & Address: Phone: PO Box 306 Eureka, KS 67045 Date: Operator Title: Signature Bryan Marshall New Operator's License No. Contact Person: Marshall Oil, LLC 620-750-0058 New Operator's Name & Address: 304 E. 9th St. Oil / Gas Purchasers Eureka, KS 67045 Operator Title: 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. .1 LC _ 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.: F-25,889 . Recommended action: No NE permitted by No.: _ Authorized Signature Authorized Signature DISTRICT Mail to: Past Operator District 3 New Operator

Side Two

Must Be Filed For All Wells

KDOR Lease	e No.:	114974			
* Lease Name:		Llybyd Kebert		NW/4 of the Sec.10 Twp.30 R.15E	
Well No.	API No. (YR DRLD/PRE '6	Footage from 7) (i.e. FSL = Feet f	n Section Line from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-205-21590	-00-00 5102 FS FNL	2820 FELFWL	OIL	PROD
2	15-205-21591	-00-00 4451 FSYFNL	3456 (FEL)FWL	OIL	PROD
3	15-205-22119	-00-00 5117 (S)/FNL	3474 FEL FWL	OIL	PROD
.4	15-205-23058-	00-00 4772 FSI FNL	4411 FEI/FWL	OIL	PROD
5	15-205-23303-	00-00 5116 FSI) FNL	4994 FEI/FWL	OIL	PROD
6	15-205-23472-	00-00 3451 FSVFNL	4457 FEIVFWL	OIL	PROD
7	15-205-23680-	00-00 4113 FSIVENL	4436 FE /FWL	OIL	PROD
8	15-205-23984-	00-00 3506 FSL/FNL	4143 (FE)/FWL	OIL	PROD
9	15-205-24822-0	00-00 4454 FSL/FNL	2867 FE /FWL	OIL	PROD
INJ-1	15-205-24823-	00-00 4767 FSVFNL	3151 FE FWL	EOR	Active
INJ-2	15-205-24824-0	00-00 4782 FSUFNL	3805 FEIVEWL	EOR	Active
10	15-205-27952-0	00-00 4439 (FS)/FNL	4115 FEIL/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 _	KCC	WICHITA
		FSL/FNL	FEL/FWL _		17 2010
		FSL/FNL	FEL/FWL	F	RECEIVED
		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 January 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 (C	athodic Protection Borehole Intent) 🗵 T-1 (Transfer) 🗌 CP-1 (Plugging Application)		
OPERATOR: License # 3 5 3 4 6 Name: Marshall Oil, LLC	Well Location:		
204 E Oth Ct			
7,00,000 17	County: Wilson Lease Name: Livoyd Kebert Woll # ALL		
Address 2: KS 67045	Lease Name Well #		
City: Eureka State: KS Zip: 67045 + State: Europe Bryan Marshall	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Contact Foldon.	NW/4 of the Sec.10 Twp.30S R.15E		
Thorie. () Tax. ()			
Email Address: NA KCC WICHITA Surface Owner Information:			
Name: Lloyd & Carol Kebert	When filing a Form T-1 involving multiple surface owners, attach an additiona		
Address 1: 12846 700 Rd	sheet listing all of the information to the left for each surface owner. Surfac 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: Fredonia State: KS Zip: 66736 +			
the KCC with a plat showing the predicted locations of lease roads, tank be are preliminary non-binding estimates. The locations may be entered on the solutions of the following:	natteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
Select one of the following:			
I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be loca CP-1 that I am filing in connection with this form; 2) if the form bei form; and 3) my operator name, address, phone number, fax, and	ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this		
I have not provided this information to the surface owner(s). I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KC	er(s). To mitigate the additional cost of the KCC performing this fithe surface owner by filling out the top section of this form and		
If choosing the second option, submit payment of the \$30.00 handling fee form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 v	e with this form. If the fee is not received with this form, the KSONA-1 will be returned.		
hereby certify that the statements made herein are true and correct to the	e best of my knowledge and belief.		
Date: 7-12-16 Signature of Operator or Agent:	Mulall Title: Ocener		
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