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 Dale of Transfer: AUGUST 24, 2016 Oil Lease: No. of Oil Wells Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 120091 Gas Gathering System: Lease Name: GLEN BERG E-28785 Sallwater Disposal Well - Permit No. Twn Spot Location: 5182 S Line Legal Description of Lease: 80 ACRES IN THE WEST ONE-HALF W Line OF THE NORTHEAST QUARTER Enhanced Recovery Project Permit No. Entire Project: County: WILSON No Number of Injection Wells BARTLESVILLE Production Zone(s): Field Name: CHEROKEE OIL BASIN AREA BARTLESVILLE 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. COLLEEN R DENNIS Contact Person: NATARAJA OIL CORPORATION Phone: 620-212-2975 444 Collinwood Loop, Foley, AL 36535 SECRETARY Received ION COMMISSION New Operator's License No. 35369

✓ **CLARENCE LYONS** Contact Person: AUG 2 4 2016 New Operator's Name & Address: CLARENCE LYONS Phone: 620-778-0738 CONSERVATION DIVISION 601 N KANSAS, CHANUTE, KS 66720 Oil / Gas Purchaser: PACER OIL WICHITA, KS Date: AUGUST 24, 2016 Tille: OWNER Signature: Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # has been 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. ONS, Clarence 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.: F - 28, 785. Recommended action: permitted by No .: Date: Authorized Signatu Authorized Signature DISTRICT PRODUCTION

Mail to: Past Operator

Side Two

Must Be Filed For All Wells

KDOR Lease No.: 120091

* Lease Name: GLEN BERG

* Location: Sec 28, Twp 30S, Rge 17E, Wilson County

Well No.	API No. (YR DRLD/PRE '67)	Footage from S (i.e. FSL = Feet from	Section Line om South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-205-22410-00-00	200 Circle	3740 Circle	Oil	TA
2	15-205-22976-00-00	1150 FSLEND	3690 FELFWI	Oil	TA
3	15-205-23193-00-00	1000 FSL(FNL)	3090 FELFWD	Oil	TA
4	15-205-23194-00-01	5182 (FSL)FNL	2256 (FEL)FWL	EOR	TA
		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		AUG 2 4 2016
		FSL/FNL	FEL/FWL	(CONSERVATION DIVISION WICHITA, KS
		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
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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) CI	3-1 (Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License # 35369 Name: Clarence Lyons Address 1: 601 N Kansas Address 2: City: Chanute Stale: KS Zip: 66720 + Contact Person: Clarence Lyons Phone: (620) 778-0738 Fax: () Email Address: ATMOil@yahoo.com Received KANSAS CORPORATION COM-	Well Location: W/2 NE/4 Sec. 28 Twp. 30 S. R. 17 x East West County: Wilson Lease Name: Berg Well #: 1-4 If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: 80 acres in the West one-half of the Northeast Quarter			
Surface Owner Information: Name: Glen Berg Address 1: 1311 N Main St Address 2: City: Garden Plain State: KS AUG 2 4 20 CONSERVATION DIVIS WICHITA KS Zip: 67050 + 9218	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 county, and in the real estate property tax records of the county treasurer.			

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on 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 (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be returned.

I hereby certify that the sta	lements made herein are true ar	nd correct to the best	of my knowledge and	d belief.
August 24, 2016 Date:	Signature of Operator or Agent: ¥	Claren	e Lym	Owner Title: