### 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:	nitea with this form.		
Oil Lease. No. of Oil Wells ** Effective Date of Transfer: August 1, 2016			
Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: _222291  Lease Name: Woods 2-6		
Gas Gathering System:			
Saltwater Disposal Well - Permit No.			
Spot Location: feet from N / S Line	NW - NW - SE - SE Sec. 6 Twp. 25 R. 31 E W		
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	NW NW SE SE of Sec. 6, TWP 25, R 31 W  County: Finney  Production Zone(s): Chase  Injection Zone(s):		
Entire Project: Yes No			
Number of Injection Wells **			
Field Name: Hugoton Panola			
** Side Two Must Be Completed.	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover OP Drilling		
Past Operator's License No. 03716	Contact Person: Rachel Hale		
Pasciperators Name & Address: 7010 Oklahoma Ave.	Phone: 580-256-5100		
Woodward, OK 73801	Date: 7-29-2016		
Title: Vice President	Signature: Tachillall		
	KCC WICHITA		
New Operator's License No. 35213 *	Contact Person: Perry Thompson AUG 2 2 2016		
New Operator's Name & Address: PT Oil, LLC	Phone: 785-528-3006		
115 N 4lh St	Oil / Gas Purchaser. Oneok Partners RECEIVED		
Osage City, KS 66523	Date: 07=89-20\$6		
Title: Operator	Signature: Terry Thompson		
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # has been		
noted, approved and duly recorded in the records of the Kansas Corporation C	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the a	bove injection well(s) or pit permit,		
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.: Recommended action:	permitted by No.:		
Date: Authorized Signature,	Date:		
Mail to: Past Operator New Operator	RODUCTION $9-2876$ UIC $9/28/6$		

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease No.: 222291					
* Lease Name:	Woods 2-6	* Location: Sec. 6, TWP 25, R 31 W			
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)
2-6	15-055-21544	1250' FS) FND	1250' Circle	Gas	Prod
		FSL/FNL	FEL/FWL		
	Management	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	***************************************	
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		FSL/FNL	FEL/FWL		
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		FSL/FNL _	FEL/FWL _		AUG 2 2 2016
					RECEIVED
		FSL/FNL			
		FSL/FNL			

A separate sheet may be attached if necessary

<sup>\*</sup> 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.

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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.

OPERATOR: License # 35213	Well Location:		
Name: PT Oil, LLC	NW NW SE SE Sec. 6 Twp. 25 S. R. 31 ☐ East ₩ West		
Address 1: P.O. Box 232	County: Finney		
Address 2: 115 N 4th St.	Lease Name: Woods Well #: 2-6		
City: Osage City State: KS Zip: 66523 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person:	the lease below:		
Phone: ( ) Fax: ( )	Ą		
Phone: ( ) Fax: ( ) CC WICHTA  Email Address: KCC WICHTA  Surface Owner Information: Fax: ( ) CC WICHTA			
Surface Owner Information:  Name: Tim Dewey Farm & Cattle Co  RECEIVED	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: P.O. Box 269	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:			
Cilly: Cimarron Slate: KS Zip: 67835 + 0269	* Andrew Control of the Control of t		
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 Select one of the following:			
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 loce CP-1 that I am filing in connection with this form; 2) if the form be 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 ack KCC will be required to send this information to the surface owner task, 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 f the surface owner by filling out the top section of this form and		
If choosing the second option, submit payment of the \$30.00 handling fed form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 v			
hereby certify that the statements made herein are true and correct to the Day Signature of Operator or Agent:	hough Tille parler		