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

	e with the Kansas Surface Owner Notification Act, nitted with this form.				
✓ Oil Lease: No. of Oil Wells 🌯 📗	Effective Date of Transfer; AUGUST 24, 2016				
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 117485				
Gas Gathering System:	1 2				
Saltwater Disposal Well - Permit No.:	Lease Name: BRUENGER				
Spot Location: feet from N / ✓ S Line	E2 _SE4 Sec. ¹⁸ Twp. ²⁶ R. ¹⁹ ✓E W				
feel from E / W Line	Legal Description of Lease: EAST HALF OF THE SOUTHEAST				
Enhanced Recovery Project Permit No.:	QUARTER				
Entire Project: Yes No	County: ALLEN				
Number of Injection Wells	Production Zone(s): SQUIRREL				
Field Name: HUMBOLDT-CHANUTE	COLUBBEI				
** Side Two Must Be Completed.	Injection Zone(s): SQUIRREL				
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 OP Drilling				
Past Operator's License No. 34919 Exp. 5/30/16	Contact Person: COLLEEN R DENNIS				
Past Operator's Name & Address: NATARAJA OIL CORPORATION	Phone: 620-212-2975				
444 COLLINWOOD LOOP, FOLEY, AL 36535	ALICUST 24, 2016				
	Date: Addison 24, 2016				
Tille: SECRETARY	Signature: Signature: Received				
	Signature: Signature: Received KANSAS CORPORATION COMMISSION				
New Operator's License No. 35369	Contact Person: CLARENCE LYONS AUG 2 4 2016				
New Operator's Name & Address: CLARENCE LYONS	Phone: 620-778-0738 CONSERVATION DIV.				
601 N KANSAS, CHANUTE, KS 66720	Oil / Gas Purchaser: PACER OIL WICHITA, KS				
	Dale: AUGUST 24, 2016				
Tille: OWNER	Signature: Clarene Dyn				
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 a					
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					
Date: Authorized Signature , /	Date: Authorized Signature				
A TOWNS OF THE PROPERTY OF THE	PRODUCTION 9-29-10 UIC 9/29/16				
Mail to: Past Operator New Operato	District				

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 117485						
* Lease Name:	BRUENGER				* Location: E	E2 SE4 OF SEC 18, TWP 2	6S, RGE 19E, ALLEN COUNTY
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)
3	15-001-30231-00	334	Circle (FSL)FNL	651	Circle (FED/FWL	Oil	PROD
4	15-001-30232-00	165	(FS)/FNL	821	(FEL)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		
			FSL/FNL		FEL/FWL		
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			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		-
			FSL/FNL		FEL/FWL		Received KANSAS CORPORATION COMMISSION
			FSL/FNL		FEL/FWL		AUG 2 4 2016
			FSL/FNL		FEL/FWL		CONSERVATION DIVISION WICHITA, KS
			ESI/FNI		EEL/EWL		

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 # 35369 Name: Clarence Lyons					
Name. Clarence Lyons	Well Location: E2 _SE4 Sec. 18 Twp. 26 S. R. 19 × East West				
Address 1: 601 N Kansas	County: ALLEN				
Address 2:	Lease Name: BRUENGER Well #:				
City: Chanute State: KS Zip: 66720 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of				
Contact Person: Clarence Lyons	the lease below: EAST HALF OF THE SOUTHEAST QUARTER				
Phone: (620) 778-0738 Fax: ()					
Email Address: ATMOil@yahoo.com					
Surface Owner Information:					
Name: CURT MUELLER	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				
Address 1: 2040 DELAWARE ROAD					
Address 2: City: HUMBOLDT State: KS Zip: 66748 +	county, and in the real estate property tax records of the county treasurer.				
he KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and batteries, pipelines, and electrical lines. The locations shown on the plate 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 Ad	cated: 1) a copy of the Form C-1. Form CB-1. Form T-1. or Form				
owner(s) of the land upon which the subject well is or will be lo CP-1 that I am filing in connection with this form; 2) if the form b form; and 3) my operator name, address, phone number, fax, an	eing filed is a Form C-1 or Form CB-1, the plat(s) required by this id email address.				
owner(s) of the land upon which the subject well is or will be lo CP-1 that I am filing in connection with this form, 2) if the form b form; and 3) my operator name, address, phone number, fax, an I have not provided this information to the surface owner(s). I ac KCC will be required to send this information to the surface own	knowledge that, because I have not provided this information, the ner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and				
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