### 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.: Gas Gathering System: Lease Name: Saltwater Disposal Well - Permit No.: \_ - NW Sec. 19 Twp. 24 R. 10 feet from N / S Line NW/4 of the Sec.19 Twp.24S R.10E Legal Description of Lease: feet from \_\_\_ E / W Line Enhanced Recovery Project Permit No.: Entire Project: V Yes No Greenwood County: \_ Number of Injection Wells Bartlesville Production Zone(s): Thrall-Aagard 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: Emergency Burn Settling Haul-Off Workover 34998 Jonathan Freiden Past Operator's License No. Contact Person: Ace Energy LLC 773-209-8602 Past Operator's Name & Address: Phone: 11704 Aberdeen Rd. Leawood KS, 66211 Date: Operator Title: Signature: Casey Minshew New Operator's License No. Contact Person: SX54, LLC 512-731-7723 New Operator's Name & Address: Phone: 1900 W. Gray #130945 Oil / Gas Purchaser Houston, TX 77219 Operator 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. 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 . Recommended action: None permitted by No.: \_\_\_ Authorized Signature Authorized Signature DISTRICT Mail to: Past Operator New Operator District 3

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease	e No.:10247	I I and bearing A			
* Lease Name	:Hawthorn			NW/4 of the Sec.19 Twp.24S R.10E	
Well No.				Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
2	15-073-30303-00-00	2970 FSLYFNL	2970 FELYFWL	OIL	PROD
1	15-073-01204-00-01/	2970 FSIJFNL	3630 FE JFWL	EOR	Active
		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 _		-
	4	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		

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.

### 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 (Intent)	Cathodic Protection Borehole Intent) 🗵 T-1 (Transfer) 🗌 CP-1 (Plugging Application)		
OPERATOR: License #34998	Well Location:		
Name: Ace Energy LLC	NW Sec. 19 Twp. 24 S. R. 10 🗷 East West		
Address 1: 11704 Aberdeen Rd.	County: Greenwood		
Address 2:	Lease Name: Hawthorne A Well #: ALL		
City: Leawood State: KS Zip: 66211 + Contact Person: Jonathan Freiden	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Phone: (	NW/4 of the Sec.19 Twp.24 R.10E		
Email Address: NA	KCC WICHITA		
Surface Owner Information: Name: Jerry and Mary Duesonbury	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 where 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 1: 1238 NW 100 Rd			
Address 2:			
City: Attica State: KS Zip: 67009 +			
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:			
<ul> <li>✓ I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be loced. CP-1 that I am filing in connection with this form; 2) if the form beform; and 3) my operator name, address, phone number, fax, an</li> <li>☐ 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</li> </ul>	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this		
that I am being charged a \$30.00 handling fee, payable to the KO If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	CC, which is enclosed with this form.  ee with this form. If the fee is not received with this form, the KSONA-1		
hereby certify that the statements made herein are true and correct to the Date:  Signature of Operator or Agent:	he best of my knowledge and belief.  Title:		