

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISIONForm T-1
July 2014Form 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 2 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☒ Saltwater Disposal Well - Permit No.: D17751.0
- Spot Location: 1621 feet from ☐ N / ☒ S Line
- 4690 feet from ☒ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Bemis-Shuttles ✓

** Side Two Must Be Completed.

Effective Date of Transfer: 9/1/16KS Dept of Revenue Lease No.: 110812 ✓Lease Name: Martin Dreiling ✓Sec. 4 Twp. 12 R. 17 ☐ E ☒ WLegal Description of Lease: SW/4 4-12-17 ✓County: Ellis ✓Production Zone(s): LansingInjection Zone(s): Cedar Hills ✓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 SectionType of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☒ DrillingPast Operator's License No. 7383 ✓Past Operator's Name & Address: Grady Bolding Corp.
P.O. Box 486 Ellinwood, KS 67526Title: Sec/TreasContact Person: Grady BoldingPhone: 620-564-2240Date: 9/1Signature: [Signature]New Operator's License No. 34888 ✓New Operator's Name & Address: American Oil, LLC
1023 Reservation Rd. Hays, KS
67601Title: PresidentContact Person: Zach PattersonPhone: 785-259-3717 KCC WICHITAOil / Gas Purchaser: CHS SEP 13 2016Date: 9/16/16 RECEIVEDSignature: [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.

American Oil LLC is acknowledged as

the new operator and may continue to inject fluids as authorized by

Permit No.: D-17.751 Recommended action: NONEDate: 10-13-16 Cheryl L Beyer

Authorized Signature

_____ is acknowledged as

the new operator of the above named lease containing the surface pit

permitted by No.: _____

Date: _____

Authorized Signature

DISTRICT _____	EPR <u>10-12-16</u>	PRODUCTION <u>10-14-16</u>	UIC <u>10-13-16</u>
Mail to: Past Operator <u>10-13-16</u>	New Operator <u>10-13-16</u>	District <u>(4)</u>	<u>10-13-16</u>

KDOR Lease No.:

* Location: SW/4 S4-T12S-R17W

Well Status
(PROD/TA'D/Abandoned)

1 15-051-60012-0001 ✓ 1621 ESL/FNL 4690 REL/FWL INJ AI *

FEL/FWL

FEL/FWL

FEL/FWL

FFI / FWI

FFI / FWI

FEI / FWI

FEL /EW/

FEI /FWI

FFI /FWI

EEI /EWI

FEI /FWI

EEI /EWI

EEI /EWI

EEI /EWI

EEI /EWI

CEL /EW/

EFL/EMI

EEI /EWI

EFL/EMA

TEL 5041

EEL/EAM

* 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.

* Well Status - Z Patterson 10/12/16

KCC WICHITA
SEP 13 2016
RECEIVED

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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) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 34888
Name: American Oil, LLC
Address 1: 1023 Reservation Rd.
Address 2: _____
City: Hays State: KS Zip: 67601 + _____
Contact Person: Zach Patterson
Phone: (785) 259-3717 Fax: (_____) _____
Email Address: AmericanOilLLC@gmail.com

Well Location: _____ Sec. 4 Twp. 12 S. R. 17 ☐ East ☒ West
County: Ellis
Lease Name: Martin Drilling Well #: _____
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

Sec 4 54-T12S-R17W

Surface Owner Information:

Name: Virginia Drilling
Address 1: 1327 Golden Belt Dr
Address 2: _____
City: Hays State: KS Zip: 67601 + _____

KCC WICHITA
SEP 13 2016
RECEIVED

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 statements made herein are true and correct to the best of my knowledge and belief.

Date: 9/6/16 Signature of Operator or Agent: [Signature] Title: President