

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISIONREQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION OR SURFACE PIT PERMITForm 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 5 **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☒ Enhanced Recovery Project Permit No.: E-24272 ✓
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells 1 **
- Field Name: Erie ✓

**** Side Two Must Be Completed.**Effective Date of Transfer: July 29, 2016KS Dept of Revenue Lease No.: 114284 ✓Lease Name: Luther/Noakes ✓_____ Sec. 20 Twp. 28s R. 20 ☒ E ☐ WLegal Description of Lease: W/2 of the SE/4 S/2 of Sec. 20-28-
20-28-20ECounty: Neosho ✓Production Zone(s): BartlesvilleInjection Zone(s): Bartlesville ✓Surface Pit Permit No.: 2028 was never built* P1046-8 was 2640 feet from ☐ N / ☒ S Line of Section
1500 feet from ☒ E / ☐ W Line of Section
(API No. if Drill Pit, WO or Haul)Type of Pit: ☒ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ DrillingPast Operator's License No. 8391 ✓Past Operator's Name & Address: Jon McCoy13300 rooks rd. Erie, Ks. 66733Title: ownerContact Person: Jon McCoyPhone: 620-704-7919Date: July 29, 2016Signature: Jon McCoyKCC WICHITA
DEC 12 2016
RECEIVEDNew Operator's License No. 32595 ✓New Operator's Name & Address: MSG Resources, Inc.95 1400 st. lola, Ks. 66749Title: Co-OwnerContact Person: Michael E. BrownPhone: 620-365-0638Oil / Gas Purchaser: MVPDate: July 29, 2016Signature: Michael E BrownReceived
KANSAS CORPORATION COMMISSION

AUG 31 2016

CONSERVATION DIVISION
WICHITA, KS

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.

MSG Resources Inc is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: E-24,272. Recommended action: NONE

Date: 12-16-16Authorized Signature: Cheryl L Berger

MSG Resources, Inc. is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.: P10468.

Date: 12/15/16Authorized Signature: Olivia Raigosa

DISTRICT _____

Mail to: Past Operator 12-16-16EPR 12/15/16PRODUCTION 12-19-16New Operator 12-16-16District (3) 12-16-16UIC 12-16-16

* Lease Name: Luther/Noakes

* Location: ~~W/2 of SE/4~~ S2 of Sec 20-28-20E

[illegible]

KCC WICHITA
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KANSAS CORPORATION COMMISSION

AUG 31 2016

CONSERVATION DIVISION
WICHITA, KS

* 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.

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 32595
Name: MSG Resources, Inc.
Address 1: 975 1400 st.
Address 2: _____
City: Iola State: Ks Zip: 66749 + _____
Contact Person: Michael E. Brown
Phone: (620) 365-0638 Fax: (_____) _____
Email Address: _____

Well Location:
_____ Sec. 20 Twp. 28s S. R. 20 ☒ East ☐ West
County: Neosho
Lease Name: Luther/Noakes Well #: _____

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

W/2 of the SE/4 **KCC WICHITA**
S/2 of Sec. 20 Twp. 28s R. 20E
AUG 31 2016

Surface Owner Information:

Name: Bill Noakes
Address 1: 1217 N. Main
Address 2: _____
City: Elise State: Ks Zip: 66733 + _____

DEC 12 2016

RECEIVED

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: July 29, 2016 Signature of Operator or Agent: Michael E. Brown Co-Owner Title: _____