

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:

- Oil Lease: No. of Oil Wells 4 ..
- Gas Lease: No. of Gas Wells 3 ..
- Gas Gathering System: _____
- Saltwater Disposal Well - Permit No. D21580.0
- Spot Location: 4125 feet from N / S Line
165 feet from E / W Line
- Enhanced Recovery Project Permit No.: E26330.1
- Entire Project: Yes No
- Number of Injection Wells 1 ..

Field Name: Fredonia ✓

**** Side Two Must Be Completed.**

Effective Date of Transfer: 09/01/2016

KS Dept of Revenue Lease No.: 117509 / 212554/226120

Lease Name: Boyer ✓

NE4 Sec. 33 Twp. 29 R. 15 E W

Legal Description of Lease: NE/4 of Sec 33, T29S-R15E ✓

less the NE/4 of the NE/4 of the NE/4 of said Sec 33, T29S-R15E

County: Wilson ✓ Received
KANSAS CORPORATION COMMISSION

Production Zone(s): Bartlesville

Injection Zone(s): Bartlesville **KANSAS CITY**

OCT 03 2016
CONSERVATION DIVISION
WICHITA, KS

Surface Pit Permit No. E26330.1/D21580.0
(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 OR Drilling

Past Operator's License No. 32912 **Exp. 9/30/16**

Contact Person: Douglas Lamb

Past Operator's Name & Address: Carroll Energy, LLC

Phone: 620-698-2150

P.O. Box 3950, Bartlesville, OK 74006

Date: 09/26/2016

Title: Manager

Signature: Douglas Lamb **KCC WICHITA**

New Operator's License No. 33739 ✓

Contact Person: Douglas Lamb **OCT 28 2016**

New Operator's Name & Address: SEK Energy, LLC

Phone: 620-698-2150 **RECEIVED**

149 Benedict Rd., P.O. Box 55

Oil / Gas Purchaser: Coffeyville Resources/River Rock Operating/Cherokee Basin Pipeline

Benedict, KS 66714

Date: 09/26/2016

Title: Manager

Signature: Douglas Lamb

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # E26330.1/D21580.0 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.

SEK Energy LLC is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: D21580. Recommended action: NONE

_____ is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.: _____

Date: 11-14-16 Cheryl Boyer
Authorized Signature

Date: _____
Authorized Signature

DISTRICT _____	EPR <u>11/10/16</u>	PRODUCTION <u>11-14-16</u>	UIC <u>11-14-16</u>
Mail to: Past Operator <u>11-14-16</u>	New Operator <u>11-14-16</u>	District <u>(5) 11-14-16</u>	

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- Spot Location: 4125 feet from N / S Line
165 feet from E / W Line
- Enhanced Recovery Project Permit No. E26330.1
- Entire Project: Yes No
- Number of Injection Wells 1 ..

Field Name: Fredonia **Boyer**
**** Side Two Must Be Completed.**

Effective Date of Transfer: 09/01/2016

KS Dept of Revenue Lease No.: 117509 / 212554/226120

Lease Name: Boyer

NE4 Sec. 33 Twp. 29 R. 15 E W

Legal Description of Lease: NE/4 of Sec 33, T29S-R15E
less the NE/4 of the NE/4 of the NE/4 of said Sec 33, T29S-R15E

County: Wilson **Received**
KANSAS CORPORATION COMMISSION

Production Zone(s): Bartlesville **OCT 03 2016**
Injection Zone(s): Bartlesville **CONSERVATION DIVISION**
WICHITA, KS

Surface Pit Permit No. E26330.1/D21580.0
(API No. if Drill Pit, WO or Haul)

Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling

_____ feet from N / S Line of Section
_____ feet from E / W Line of Section

Past Operator's License No. 32912 **Exp. 9/30/16**

Past Operator's Name & Address: Carroll Energy, LLC
P.O. Box 3950, Bartlesville, OK 74006

Title: Manager

Contact Person: Douglas Lamb
Phone: 620-698-2150
Date: 09/26/2016
Signature: **Douglas Lamb**

KCC WICHITA

New Operator's License No. 33739

New Operator's Name & Address: SEK Energy, LLC
149 Benedict Rd., P.O. Box 55
Benedict, KS 66714

Title: Manager

Contact Person: Douglas Lamb
Phone: 620-698-2150
Oil / Gas Purchaser: Coffeyville Resources/River Rock Operating/Cherokee Basin Pipeline
Date: 09/26/2016
Signature: **Douglas Lamb**

OCT 28 2016

RECEIVED

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # E26330.1/D21580.0 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.

SEK Energy LLC is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No. **E-26,330**. Recommended action: **NONE**

Date: **11-14-16**
Cheryl L Boyer
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	PRODUCTION	UIC
Mail to Past Operator	11-14-16	11-14-16	11-14-16
	New Operator	District	3

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form KSONA-1
July 2014
Form Must Be Typed
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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 # 33739
Name: SEK Energy, LLC
Address 1: P.O. Box 55
Address 2: 149 Benedict Road
City: Benedict State: KS Zip: 66714 +
Contact Person: Kerry King
Phone: (620) 698-2150 Fax: (620) 698-2150
Email Address: kking@sekenergy.com

Well Location:
- - - NE Sec. 33 Twp. 29 S. R. 15 East West
County: Wilson
Lease Name: Boyer Well #:

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

NE/4 of Sec 33, T29-R15S, less the NE/4 of the
NE/4 of the NE/4 of said Sec 33, all in Sec 33
T29S-R15E

Surface Owner Information:

Name: Rita Boyer/Daniels
Address 1: 10410 N. 148th Ave.
Address 2:
City: Owasso State: OK Zip: 74055 +

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: 9/26/16 Signature of Operator or Agent: *Douglas L. Lamb* Title: Manager

Received
KANSAS CORPORATION COMMISSION
KCC WICHITA
OCT 28 2016
OCT 03 2016
RECEIVED
CONSERVATION DIVISION
WICHITA KS