KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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, Check Applicable Boxes: MUST be submitted with this form. Oil Lease: No. of Oil Wells Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 226647 Gas Gathering System: Lease Name: Saye, Doyle A Saltwater Disposal Well - Permit No.: N2 _ S2 _ NW _ SE Sec. 27 Twp. 31 R. 18 ▼E W feet from N / S Line Legal Description of Lease: W2 SE4 27-31S-18E feet from | E / | W Line Enhanced Recovery Project Permit No.: Entire Project: Yes No County: Labette Number of Injection Wells Production Zone(s):_ Field Name: Cherokee Basin Coal Area Injection Zone(s):_ ** Side Two Must Be Completed. Surface Pit Permit No.: _ feet from N / S Line of Section (API No. if Drill Pit, WO or Haul) W Line of Section Type of Pit: Emergency Settling Burn Haul-Off Workover Past Operator's License No. Contact Person: River rock Operating LLC Phone: 405-606-7481 Past Operator's Name & Address: 211N. Robinson, Suite 200, Oklahoma City, OK 73102 Title: Vice President of Operations Received
KANSAS CORPORATION COMMISSION Residential 35378 J Doyal Saye Contact Person: New Operator's Name & Address: Saye, Doyal A Phone: 620-820-9015 22033 Finney Rd, Dennis Ks 67341 Oil / Gas Purchaser: CONSERVATION DIVISION WICHITA, KS Landowner 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: permitted by No.: Authorized Signature Authorized Signature DISTRICT 3 **PRODUCTION** Mail to: Past Operator **New Operator** District

Side Two

Must Be Filed For All Wells

* Lease Name	Saye, Doyle A		* Location:	N2 S2 NW SE 27-31-1	8E
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet from	Section Line om South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
1-27	1509923838 🗸	1860 Circle	1868 FEDFWL	Gas	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL			
			FEL/FWL		Received Received SAS CORPORATION COMMISSION
			FEL/FWL		47 2016
		FSL/FNL _	FEL/FWL _		- -
		FSL/FNL	FEL/FWL _		CONSERVATION DIVISION WICHITA, KS
		FSL/FNL	FEL/FWL _		

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 # 35378	Mallilandia		
Name: Saye, Doyal A	Well Location: N2 S2 NW SE a 27 31 18		
Name: Saye, Doyal A Address 1: 22033 Finney Rd	N2 S2 NW SE Sec. 27 Twp. 31 S. R. 18 X East Wes		
Address 2:			
City: Dennis State: KS 7:: 67341	Lease Name: Sayo, Soyar A Well #: 27-1 (-2)		
City: Dennis State: KS Zip: 67341 + Contact Person: Doyal Saye	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Phone: (620) 820-9015 Fax: ()			
Email Address: aaron.saye@gmail.com			
Surface Owner Information:			
Name: _Doyal A. Saye	When filing a Form T.1 imphing multiple and		
Name: Doyal A. Saye Address 1: 22033 Finney Rd	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		
Address 2:	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.		
City: Dennis State: KS Zip: 67341 +			
" Nee min a plat showing the predicted locations of lease mans i	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat. Form CB-1 plat or a separate plat may be submitted		
are preliminary non-binding estimates. The locations may be entere	thodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat d 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 owner(s) of the land upon which the subject well is or will be	e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form TB-1, or Form TB-1, o		
Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will b CP-1 that I am filing in connection with this form; 2) if the for form; and 3) my operator name, address, phone number, fax I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface.	e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, the plat(s) required by this is, and email address. I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this lass of the surface owner by filling out the top cention of this formation.		
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