

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 7 \*\*  
☒ Gas Lease: No. of Gas Wells 4 \*\*  
☐ 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-27749  
Entire Project: ☒ Yes ☐ No  
Number of Injection Wells 1 \*\*  
Field Name: Peru-Sedan ✓

Effective Date of Transfer: 11/1/2016KS Dept of Revenue Lease No.: 120696 & 215176 ✓Lease Name: Oakridge ✓\_\_\_\_\_ Sec. \_\_\_\_\_ Twp. 33 R. 12 ☒ E ☐ WLegal Description of Lease: Portions of Sections 11, 13, 15, 23, and SW4 12,  
NE4 14, all in T33S-R12E ✓County: Chautauqua ✓Production Zone(s): Arbuckle Dolomite, Mulky Shale, Redd SandstoneInjection Zone(s): Arbuckle Dolomite ✓**\*\* Side Two Must Be Completed.**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. 31302 ✓Contact Person: P J BuckPast Operator's Name & Address: Jones & Buck Development, LLCPhone: 620-725-3636

P.O. Box 68 Sedan, KS 67361

Date: 11/2/2016Title: Member

Signature: \_\_\_\_\_

New Operator's License No. 32255 ✓Contact Person: P J BuckNew Operator's Name & Address: Kansas Energy Company, LLCPhone: 620-725-3636

P.O. Box 68 Sedan, KS 67361

Oil / Gas Purchaser: Coffeyville ResourcesDate: 11/2/2016Title: Agent--Tim Doty

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.

Kansas Energy Company LLC is acknowledged as  
the new operator and may continue to inject fluids as authorized by  
Permit No.: E-27749 . Recommended action: NONE

Date: 12-8-16

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 \_\_\_\_\_

Mail to: Past Operator 12-8-16EPR 12/7/16New Operator 12-8-16PRODUCTION 12-14-16UIC 12-8-16District (3) 12-8-16



## Must Be Filed For All Wells

KDOR Lease No.: 120696 &amp; 215176 ✓

\* Lease Name: Oakridge

\* Location: SW4 Sec 12, NE4 Sec 14-T33S-R12E

Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
Sec 12-#1M	15-019-25814-00-00 ✓	165	<u>Circle</u> FSL/FNL	4220 <u>Circle</u> FEL/FWL	Gas Inactive 215176
Sec 14-#1	15-019-23949-00-01 ✓	3830	<u>Circle</u> FSL/FNL	2100 <u>Circle</u> FEL/FWL	Gas Prod 215176
Sec 14-#2	15-019-23963-00-00 ✓	4155	<u>Circle</u> FSL/FNL	1500 <u>Circle</u> FEL/FWL	Oil Prod 120696
Sec 14-#4	15-019-23965-00-00 ✓	4300	<u>Circle</u> FSL/FNL	1960 <u>Circle</u> FEL/FWL	Oil Inactive 120696
Sec 14-#6	15-019-19018-00-01 ✓	3960	<u>Circle</u> FSL/FNL	2475 <u>Circle</u> FEL/FWL	inj Active
Sec 14-#1MC	15-019-25872-00-00 ✓	3950	<u>Circle</u> FSL/FNL	1650 <u>Circle</u> FEL/FWL	Oil Inactive 120696
Sec 14-#1West	15-019-24086-00-00 ✓	3795	<u>Circle</u> FSL/FNL	2805 <u>Circle</u> FEL/FWL	Gas Prod 120696 + 215176
Sec 14-#2West	15-019-24087-00-00 ✓	2685	<u>Circle</u> FSL/FNL	2610 <u>Circle</u> FEL/FWL	Oil Prod 120696
Sec 14-#2M	15-019-25827-00-00 ✓	3200	<u>Circle</u> FSL/FNL	2310 <u>Circle</u> FEL/FWL	Oil Inactive 120696
Sec 14-#3M	15-019-25833-00-00 ✓	2970	<u>Circle</u> FSL/FNL	1500 <u>Circle</u> FEL/FWL	Oil Inactive 120696
Sec 14-#4M	15-019-25848-00-00 ✓	3110	<u>Circle</u> FSL/FNL	1640 <u>Circle</u> FEL/FWL	Oil Prod 120696
Sec 14-#LAM4	15-019-26948-00-00 ✓	2970	<u>Circle</u> FSL/FNL	2970 <u>Circle</u> FEL/FWL	Gas Prod 120696 + 215176
			FSL/FNL	FEL/FWL	
			FSL/FNL	FEL/FWL	
			FSL/FNL	FEL/FWL	
			FSL/FNL	FEL/FWL	
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			FSL/FNL	FEL/FWL	

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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

**CERTIFICATION OF COMPLIANCE WITH THE  
KANSAS SURFACE OWNER NOTIFICATION ACT**

Form KSONA-1  
July 2014  
**Form Must Be Typed**  
**Form must be Signed**  
**All blanks must be Filled**

*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 # 32255  
Name: Kansas Energy Company, LLC  
Address 1: P.O. Box 68  
Address 2: \_\_\_\_\_  
City: Sedan State: KS Zip: 67361 + \_\_\_\_\_  
Contact Person: P J Buck  
Phone: ( 620 ) 725-3636 Fax: ( 620 ) 725-3662  
Email Address: jonesbuck103@yahoo.com

Well Location:  
\_\_\_\_\_ Sec. \_\_\_\_\_ Twp. 33 S. R. 12 ☒ East ☐ West  
County: Chautauqua  
Lease Name: Oakridge Well #: \_\_\_\_\_

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

**Portions of Sections 11, 13, 15, 23, and SW4 12,  
NE4 14, all in T33S-R12E**

**Surface Owner Information:**

Name: David Alan Lewis Tr; Karen M. Lewis Tr  
Address 1: 1444 Road 27  
Address 2: \_\_\_\_\_  
City: Sedan State: KS Zip: 67361 + \_\_\_\_\_

*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: 11/2/2016 Signature of Operator or Agent: [Signature] Agent--Tim Doty Title: \_\_\_\_\_

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