### 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:	ttea with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 01/01/2017		
Gas Lease: No. of Gas Wells 2 **	KS Dept of Revenue Lease No.: 231407, 231408 VKP  Lease Name: McPherson		
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease: Located in the NW/4 of Section 16		
Enhanced Recovery Project Permit No.:	Township 5 South, Range 40 West  County: Cheyenne  Production Zone(s): Niobrara		
Entire Project: Yes No			
Number of Injection Wells **			
Field Name: Cherry Creek			
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pit, WO or Haul)	feet from  E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off		
Past Operator's License No. 35011	Contact Person:Matthew A. Wurtzbacher		
Past Operator's Name & Address:Caerus WashCo LLC	Phone: 303-565-4600		
1001 17th ST, STE 1600 Denver, CO 80202	Date: 12/29/16		
Title: President	Signature: Matthewallufbacky		
	July 100 miles and 100 miles a		
New Operator's License No	Contact Person:		
New Operator's Name & Address: Foundation Energy Management, LLC	Phone: 303-244-8100		
16000 Dallas Parkway, Suite 875	Oil / Gas Purchaser: Priority Oil & Gas LLC KCC WICHIT		
Dallas, TX 67756	Date: 12-29./L JAN 09 2017		
Title: Executive Vice President	Signature: RECEIVED		
Tide.	Signature. RECEIVE		
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.		
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		
Permit No.: Recommended action:	permitted by No.:		
. Hosoninolided delicit.	portinited by No		
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR _/ // 2/17	PRODUCTION JAN 13 2017 UIC JAN 13 2017		
Mail to: Past Operator New Operator			

#### Side Two

#### Must Be Filed For All Wells

	No.: 231407, 231408 V		* Location:	Section 16 T5S R40W	
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)
11-16	1502320952	Circle 975 FNL FSL/FNL	Circle 430 FWL FEL/FWL	Gas	KDOR# Producing 23140
12-16	1502320953	1980 FNL FSL/FNL	330 FWL FEL/FWL	Gas	Producing 23140
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
8 .		FSL/FNL	FEL/FWL	· ·	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	· · · · · · · · · · · · · · · · · · ·	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		<u> </u>
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		<u> </u>
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		WCC WICHITA
		FSL/FNL	FEL/FWL		IAN 09 2017
		FSL/FNL	FEL/FWL		JAN 09 2017 RECEIVED

A separate sheet may be attached if necessary

<sup>\*</sup> 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.

00707			
OPERATOR: License # 33725	Well Location:		
Name: Foundation Energy Management, LLC			
Name: Foundation Energy Management, LLC  Address 1: 16000 Dallas Parkway, Suite 875	County: Cheyenne		
Address 2:	Lease Name: McPherson Well #:		
City: Dallas State: TX Zip: 75248 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description o		
Contact Person: Joel P. Sauer	the lease below:		
Contact Person: Joel P. Sauer  Phone: ( 303 ) 244-8100 Fax: ( 303 ) 861-0604	NW of Section 16 Township 5 South, Range 40		
Email Address: jsauer@foundationenergy.com	ICH/Adat		
Koo	0.007		
Surface Owner Information:	3 2017		
Name: Perry R McPherson and Sandra McPherson Hicks	EIVED		
Name: Perry R McPherson and Sandra McPherson Hicks  RECEIVED  When filling a Form T-1 involving multiple surface owners, attack sheet listing all of the information to the left for each surface of the			
	owner information can be found in the records of the register of deeds for the		
Address 2:	county, and in the real estate property tax records of the county treasurer.		
City: Zip: 77040 +			
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 CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface o	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this is of the surface owner by filling out the top section of this form and		
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP	g fee with this form. If the fee is not received with this form, the KSONA-1 -1 will be returned.		
I hereby certify that the statements made herein are true and correct to	o the best of my knowledge and belief.		
A			
Date: 129/6 Signature of Operator or Agent:	1 Pl Title: Exec. V.P.		