

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
REQUEST FOR CHANGE OF OPERATOR

Form T-1
July 2014
Form must be Typed
Form must be Signed
All blanks must be Filled

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 1 **
- ☐ 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.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells 0 **

Field Name- Spivey-Grabs-Basil

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

Effective Date of Transfer: November 1, 2016

KS Dept of Revenue Lease No.: Oil:130527 Gas: 218351/243220

Lease Name: GILCHRIST "P" -15

- C - NE - NW Sec. 15 Twp. 30s R 7 ☐ E ☒ W

Legal Description of Lease: NW/4 of Sec 15-30s-7w

County: Kingman

Production Zone(s): Mississippian

Injection Zone(s): _____

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 Section

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

Past Operator's License No. 5003 ✓

Past Operators Name & Address: McCoy Petroleum Corporation
9342 E. Central, Wichita, KS 67206-2573

Title: Vice President - Production

Contact Person: Scott Hampel

Phone: 316-636-2737

Date: 10/17/2016

Signature: Scott Hampel

New Operators License No. 31191 ✓

New Operator's Name & Address: R&B Oil & Gas, Inc.
124 N. Main
Attica, KS 67009-0195

Title: VP Operations

Contact Person: Derek Newberry **Received KANSAS CORPORATION COMMISSION**

Phone: 620-254-7251 **NOV 28 2016**

Oil / Gas Purchaser: MVPurchasing / Oneok Midstream **CONSERVATION DIVISION WICHITA, KS**

Date: 11/9/16

Signature: Dan Newberry

Acknowledgment of Transfer. The above request for transfer of injection authorization, surface pit permit # NA 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
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ Recommended action: _____
Date: _____
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 1-18-17 PRODUCTION 11/9/17 **JAN 19 2017**
Mail to: Past Operator _____ New Operator _____ District _____

Mail to: KCC - Conservation Division, 266 N. Main Street - Suite 220, Wichita, Kansas 67202-1513

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form KSONA-1

July 2014

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**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 # 5003
Name: McCoy Petroleum Corporation
Address 1: 9342 E. Central,
Address 2: _____
City: Wichita State: KS Zip: 67206 + 2 5 7 3
Contact Person: Scott Hampel
Phone: (316) 636-2737 Fax: (316) 636-2741
Email Address: scott@mccoypetroleum.com

Well Location: **NW/4 of Sec 15-30s-7w**
C NE NW Sec. 15 Twp. 30s S. R. 7 ☐ East ☒ West
County: Kingman
Lease Name: GILCHRIST "P" -15 Well #: #1-15
If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
NW/4 of Sec 15-30s-7w

Surface Owner Information:

Name: Steffen Family Natural Resources, LLC
Address 1: 3500 N. Mayfield Road
Address 2: _____
City: Hutchinson State: KS Zip: 67502 + _____

Received
KANSAS CORPORATION COMMISSION
NOV 28 2016
CONSERVATION DIVISION
WICHITA, KS

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 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: 10/17/2016 Signature of Operator or Agent: Scott Hampel Title: Vice President - Production
Scott Hampel