### 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,

Check Applicable Boxes:	Effective Date of Transfer: 2-9-/7			
Oil Lease: No. of Oil Wells**	Lifective Date of transler.			
Gas Lease: No. of Gas Wells **	KS Dept of Revenue Lease No.: 231183 KR  Lease Name: Lutters			
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease: Sec. 25-11S-42W			
Enhanced Recovery Project Permit No.:	义NE/4			
Entire Project: Yes No	County: Wallace			
Number of Injection Wells***				
	Production Zone(s): Niobrara			
Field Name:  ** Side Two Must Be Completed.	Injection Zone(s):			
Side I wo must be Completed.				
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 Workover OR Drilling			
Type of Pit: Emergency Burn Settling	PECEIVED			
Past Operator's License No. 33953 Exp. 5/30/16	Contact Person: David Stewart KANSAS CORPORATION COMMIS			
Past Operator's Name & Address: Raven Resources, LLC	Phone: 405.773.7340			
P.O. Box 6970, Edmond, Oklahoma 73083	February 2, 2017			
	Date: Conservation division			
Title: Manager	Signature: WICHITA, KS			
New Operator's License No. 35434	David Stawart			
New Operator's License No.	Contact Person: David Stewart			
New Operator's Name & Address: Raven Resources, LLC.	Phone: 405.773.7340			
P.O. Box 6970, Edmond Oklahoma 73083	Oil / Gas Purchaser:			
	Date: February 2, 2017			
	( Var al X)			
Title: Manager	Signature:			
	on authorization, surface pit permit # has been			
Acknowledgment of Transfer: The above request for transfer of injection				
	on Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the	ne 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.:			
	Date			
Date: Authorized Signature /	Date:			
DISTRICT EPR 2/14/17	PRODUCTION FEB 1 5 2017 UIG EB 1 5 2017			
Mail to: Past Operator New Ope				
	A CONTRACTOR OF THE PROPERTY O			

#### Side Two

#### Must Be Filed For All Wells

KDOR Lease No.: 231183			W 1157.1	4 1/67/		
* Lease Name:	Lutters		Location: Sec. 25-11S-42W			
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)	
3-25	15-19920358	4620 FSL/FNL	660 Circle	Gas	Producing	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	4.	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	-		
		FSL/FNL	FEL/FWL		RECEIVED KANSAS CORPORATION COMMIS	
		FSL/FNL	FEL/FWL		FEB 0 9 2017	
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION WICHITA, KS	
		FSL/FNL	FEL/FWL		WOITH, RS	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
1 35		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		OL/TINE	1 LL/1 VVL			

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

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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.

OPERATOR: License #	Well Location:	Well Location:			
Name: Raven Resources, LLC	* NE/4 Sec. 25 Two				
Address 1: P.O. Box 6970	County: Wallace				
Address 2:	Lease Name: Lutters	Well #: 3-25			
City: Edmond State: OK Zip: 73083 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of				
Contact Person: David Stewart	the lease below:				
Phone: (405) 7737340 Fax: (405) 7737488		KANSAS CORPORATION COMMISSION			
Phone: ( 405 ) 7737340 Fax: ( 405 ) 7737488  Email Address: dstewart@ravenresources.com		FEB 0 9 2017			
Surface Owner Information:		CONSERVATION DIVISION WICHITA, KS			
Name: Ronald E. Lutters	When filing a Form T-1 involving mult	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			
Address 1: 626 W. 9th Street					
Address 2:	county, and in the real estate property				
City: Goodland State: KS Zip: 67735 +					
the KCC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered 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 for form; and 3) my operator name, address, phone number, fax  I have not provided this information to the surface owner(s).	e Act (House Bill 2032), I have provided e located: 1) a copy of the Form C-1, Form being filed is a Form C-1 or Form CB-1, and email address.  I acknowledge that, because I have not owner(s). To mitigate the additional costs of the surface owner by filling out the	or a separate plat may be submitted.  If the following to the surface form CB-1, Form T-1, or Form the plat(s) required by this provided this information, the st of the KCC performing this se top section of this form and			
task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the	e KCC, which is enclosed with this form				
task, I acknowledge that I must provide the name and addre	ing fee with this form. If the fee is not re				