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: **NOVEMBER 1, 2016** Oil Lease: No. of Oil Wells Effective Date of Transfer: Gas Lease: No. of Gas Wells 1 KS Dept of Revenue Lease No.: 201322 Gas Gathering System: Lease Name: FERTIG 2H Saltwater Disposal Well - Permit No.: ___ feet from S Line Legal Description of Lease: 1320 FSL & 1320 FWL feet from | E / Enhanced Recovery Project Permit No.: _ County: KEARNY Entire Project: Yes No Number of Injection Wells _ Production Zone(s): CHASE Field Name: HUGOTON Injection Zone(s): ** Side Two Must Be Completed. Surface Pit Permit No.: S Line of Section feet from (API No. if Drill Pit. WO or Haul) W Line of Section Settling Haul-Off Workover Type of Pit: **Emergency** Burn Drilling 5249 Nancy FitzSimon Past Operator's License No. Contact Person: Phone: (210) 826-0700 OSBORN HEIRS COMPANY, LTD Past Operator's Name & Address: RECEIVED October 31, 2016 P.O. Box 17968, San Antonio, Texas 78217 Title: Vice-President Contact Person: KIM BRAND, SR. REGULATORY SPECIALIST 34832 New Operator's License No. New Operator's Name & Address: SCOUT ENERGY MANAGEMENT LLC Phone: (972) 865-7597 4901 LBJ FREEWAY, STE. 300, DALLAS, TEXAS 75244 Oil / Gas Purchaser Date: OCTOBER 31, 2016 JON PIOT /Sr. Regulatory Specialist MANAGING DIRECTOR Signature: 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 tule B DISTRICT -**PRODUCTION** Mail to: Past Operator District **New Operator**

Well: Fertig 2H

County: Kearny

API: 15-093-20767

Legal Description of Unit: W/2 Sec 26-22S-37W & E/2 Sec 27-22S-37W

Oil/Gas Purchaser: Continuum Producer Services, LLC

Leases Included*:

LESSOR	LESSEE	LEASE DATE	EFFECT. DATE	VOL	PAGE	LEGAL DESCRIPTION
Koenig, Raymond L.	Shaw, Joseph	8/23/1971	8/23/1971	42	635	T-22S, R-37W SECTION 27: SE/4 KEARNY COUNTY, KANSAS
Ramsay, Frances L., Et Al	Stewart, Lynn C.	6/7/1972	6/7/1972	45	223	T-22S, R-37W SECTION 26: W/2 SECTION 27: NE/4 KEARNY COUNTY, KANSAS

^{*}Insofar as to rights conveyed from surface to 100 feet below the Council Grove.

NOV 28 2016 RECEIVED

Side Two

Must Be Filed For All Wells

Lease Name:	FERTIG 2H		* Location: S	EC. 26 T22S R37W	
Well No.	API No. (YR DRLD/PRE '67)	Footage from S (i.e. FSL = Feet from		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandone
2H	15-093-20767-00-00	1320 Circle		GAS	TA /
		FSL/FNL	FEL/FWL	-	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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			FEL/FWL	KCC	WICHITA
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			FEL/FWL	F	RECEIVED
			FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		21 22 23 25 25 25

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.

SCANNED

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1
July 2010
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 #5249	Well Location:			
Name: OSBORN HEIRS COMPANY, LTD.	CSWSec. 26Twp. 22S. R. 37 East 🗷 West County:KEARNY			
Address 1: P.O. BOX 17968				
Address 2:	Lease Name: FERTIG Well #: 2H			
City: SAN ANTONIO State: TX Zip: 78217 + 0968	If filing a Form T-1 for multiple wells on a lease, enter the legal description o the lease below:			
Contact Person:				
KCC MICH!	TA			
Surface Owner Information: Name: WMS FARMS INC.				
Address 1: 1206 ROAD 260	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 2:	county, and in the real estate property tax records of the county treasurer.			
City: State: KS Zip: 67860+				
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathod the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice Ac	batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. t (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 loc	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form gilled is a Form C-1 or Form CB-1, the plat(s) required by this			
☐ I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling for	knowledge that, because I have not provided this information, the ter(s). To mitigate the additional cost of the KCC performing this ee, payable to the KCC, which is enclosed with this form.			
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-1	ee with this form. If the fee is not received with this form, the KSONA-1 will be returned.			
I hereby certify that the statements made have a series and the series are the series and the series are the se				
I hereby certify that the statements made herein are true and correct to the				
Date: 10/31/16 Signature of Operator or Agent: Nanca	a. Totalum Title: VICE-PRESIDENT			