

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 19 **
☐ 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.: E-31,764 ✓
Entire Project: ☐ Yes ☐ No
Number of Injection Wells 12 - 9 plus 3 unauthorized injectors **
Field Name: Paola-Rantoul ✓ **TA STATUS**

Effective Date of Transfer: 11/01/2016
KS Dept of Revenue Lease No.: 117463 ✓ **dis**
Lease Name: Renner ✓
____ - S/2 - SE/4 Sec. 16 Twp. 17S R. 22 ☒ E ☐ W
Legal Description of Lease: S/2 of SE/4 of Sec. 16 Twp. 17S R. 22E ✓
County: Miami ✓
Production Zone(s): Peru
Injection Zone(s): Peru - **Squirrel**

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

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

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

Past Operator's License No. 32834 ✓
Past Operator's Name & Address: JTC Oil, Inc.
35790 Plum Creek Rd., Osawatomie, KS 66064
Title: President

Contact Person: Tom Cain

Phone: (913)-755-2959

Date: 10/15/2016

Signature: [Signature]

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New Operator's License No. 35138 ✓
New Operator's Name & Address: S&B Operating, LLC
6340 Glenwood St., Ste #103 Overland Park, KS 66202
Title: Chief Operating Officer

Contact Person: Brad Kramer

Phone: (913)-871-3500

Oil / Gas Purchaser: Coffeyville Resources

Date: 11/01/2016

Signature: [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.

S+B Operating LLC is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: E-31,764. Recommended action: 3 wells
Drilled as Injectors - TA Status - Need to
Date: 1-25-17 Cheryl 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 _____ EPR 1/24/17 PRODUCTION 1/27/17 UIC 1-25-17
Mail to: Past Operator 1-25-17 New Operator 1-25-17 District (3) 1-25-17

Must Be Filed For All Wells

KDOR Lease No.: 117463

* Lease Name: Renner

* Location: S/2 SE/4, Sec 16, Twp 17S, 22E, Miami County, KS

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)
P-1	15-121-29430 ✓	426 <u>Circle</u> FSL/FNL 930 <u>Circle</u> FEL/FWL	Oil	Prod
P-2	15-121-29431 ✓	756 FSL/FNL 930 FEL/FWL	Oil	Prod
P-3	15-121-29432 ✓	756 FSL/FNL 1260 FEL/FWL	Oil	Prod
P-4	15-121-29496 ✓	756 FSL/FNL 1590 FEL/FWL	Oil	Prod
P-6	15-121-29448 ✓	464 FSL/FNL 600 FEL/FWL	Oil	Prod
P-7	15-121-29484 ⁴³⁴ ✓	144 FSL/FNL 624 FEL/FWL	Oil	Prod
P-9	15-121-29617 ✓	921 FSL/FNL 1095 FEL/FWL	Oil	Prod
P-10	15-121-29612 ✓	1250 FSL/FNL 1425 FEL/FWL	Oil	Prod
P-11	15-121-30630 ✓	825 FSL/FNL 330 FEL/FWL	Oil	Prod
P-12	15-121-30631 ✓	495 FSL/FNL 330 FEL/FWL	Oil	Prod
P-13	15-121-30632 ✓	165 FSL/FNL 330 FEL/FWL	Oil	Prod
PW-1	15-121-29795 ✓	893 FSL/FNL 1429 FEL/FWL	Inj	Inactive TA ✓
PW-2	15-121-29810 ✓	263 FSL/FNL 763 FEL/FWL	Inj	Inactive TA ✓
PW-3	15-121-29813 ✓	298 FSL/FNL 427 FEL/FWL	Inj	Inactive TA ✓
W-1	15-121-29320 ✓	315 FSL/FNL 1070 FEL/FWL	Inj	Active
W-2	15-121-29579 ✓	300 FSL/FNL 1380 FEL/FWL	Inj	Active
W-3	15-121-29580 ✓	426 FSL/FNL 930 FEL/FWL	Inj	Active
W-4	15-121-29497 ✓	426 FSL/FNL 1260 FEL/FWL	Inj	Active
W-6	15-121-29619 ✓	908 FSL/FNL 1456 FEL/FWL	Inj	Active
W-7	15-121-29811 ✓	268 FSL/FNL 794 FEL/FWL	Inj	Active
W-8	15-121-29812 ✓	295 FSL/FNL 459 FEL/FWL	Inj	Active
W-9	15-121-30635 ✓	660 FSL/FNL 495 FEL/FWL	Inj	Active
W-10	15-121-30967 ✓	495 FSL/FNL 825 FEL/FWL	Inj	Active

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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.

* TA Approved thru 7-7-17 > These wells ARE NOT Authorized Need Amendment Applications

✓

Must Be Filed For All Wells

KDOR Lease No.: 117463

* Lease Name: RENNER

* Location: S/2 SE/4 SEC 16 T17S R24E ²²

[illegible]

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 to please indicate which section each well is located.

* 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 # 35138
Name: S&B Operating, LLC
Address 1: 6340 Glenwood St., Ste #103
Address 2:
City: Overland Park State: KS Zip: 66202 +
Contact Person: Brad Kramer
Phone: (913) 871-3500 Fax: ()
Email Address:

Well Location:
- S/2 SE/4 Sec. 16 Twp. 17 S. R. 22 ☒ East ☐ West
County: Miami
Lease Name: Renner Well #:

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

S/2 of SE/4 of Sec.15 Twp.17S R.22E in Miami
County, Kansas

KCC WICHITA

JAN 20 2017

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Surface Owner Information:

Name: Rush Renner
Address 1: 30910 Crescent Hill Road
Address 2:
City: Paola State: KS Zip: 66071 +

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: 11/1/16 Signature of Operator or Agent: Title: C.O.O.