110116_Collingwood_1B.pdf

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: MUST be suit	bmitted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:NOVEMBER 1, 2016			
Gas Lease: No. of Gas Wells **	KS Dept of Revenue Lease No.: 220576 VILR			
Gas Gathering System:	Lease Name: COLLINGWOOD 1B			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line	<u>SESENWNW_Sec. 13_Twp. 24S_R. 38</u> E ✓ W			
feet from E / W Line	Legal Description of Lease: 1250 FNL & 1280 FWL			
Enhanced Recovery Project Permit No.:	_ "Sa Attachment 1"			
Entire Project: Yes No	County: KEARNY			
Number of Injection Wells **	Production Zone(s):_CHASE			
Field Name: HUGOTON				
** Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	feet from N / S Line of Section feet from E / W Line of Section Haul-Off Workover Drilling KCC WICHI			
5240	Non-re-Fit-Oire-re			
Past Operator's License No. 5249 V	Contact Person: Nancy FitzSimon NOV 2 8 2016			
Past Operator's Name & Address: OSBORN HEIRS COMPANY, LTD	Phone: (210) 826-0700 RECEIVED			
P.O. Box 17968, San Antonio, Texas 78217	Date: October 31, 2016			
Title: Vice-President	Signature: Manay a. Arkshauser			
34832	Contact Person: KIM BRAND, SR. REGULATORY SPECIALIST			
New Operator's License No. 34832				
New Operator's Name & Address: SCOUT ENERGY MANAGEMENT LLC				
4901 LBJ FREEWAY, STE. 300, DALLAS, TEXAS 75244	Oil / Gas Purchaser: See ATTACA MEN /			
JON PIOT	Date: OCTOBER 31, 2016			
Title: MANAGING DIRECTOR /Sr. Regulatory Specialist	Signature: Warand			
	ion authorization, surface pit permit # has been ion Commission. This acknowledgment of transfer pertains to Kansas Corporation the above injection well(s) or pit permit.			
is acknowledged a	s 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	Authorized Signature PRODUCTION FEB 2 1 2017			
DISTRICT EPR New Ope	FRODUCTION UIC			
Iviali to. Fast Operator New Ope	erator District			

Side Two

Must Be Filed For All Wells

Lease Name:	COLLINGWOOD 1B	* Location:SEC. 13 T24S R38W					
Well No.	API No. (YR DRLD/PRE '67) 15-093-21447-00-00	Footage from S (i.e. FSL = Feet fro		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned		
1B		1250 Circle	1280 Circle	GAS			
		FSL/FNL	FEL/FWL				
	-	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL					
			FEL/FWL				
		FSL/FNL _	FEL/FWL	KC	C WICHITA		
		FSL/FNL	FEL/FWL		y 2 8 2016		
		FSL/FNL	FEL/FWL		RECEIVED		
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL .				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				

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

Well: Collingwood 1B

County: Kearny

API: 15-093-21447

Legal Description of Unit: all Sec 13-24S-38W

Oil/Gas Purchaser: Energy Transfer Partners, LP

Leases Included*:

LESSOR	LESSEE	LEASE DATE	EFFECT. DATE	VOL	PAGE	LEGAL DESCRIPTION
Collingwood, Alfred	Beymer, C. E.	11/18/1944	11/18/1944	12	166	T-24S, R-38W, KEARNY COUNTY, KANSAS: SECTION 13: ALL

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

KCC WICHITA NOV 2 8 2016 RECEIVED

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.	NE_NE_SW Sec. 13 Twp. 24 S. R. 38 East 🗵 West
Address 1: P.O. BOX 17968	County: KEARNY
Address 2:	Lease Name: COLLINGWOOD Well #: 1
City: SAN ANTONIO State: TX Zip: 78217 + 0968	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
MARI CASTORENO	the lease below: COLLINGWOOD 1A W/2 NW NW SE SEC. 13-24S-38W KEARN
Email Address: maric@osbornheirs.com	ATTA
Phone: (210) 826-0700 Fax: (210) 826-7559 Email Address: maric@osbornheirs.com Surface Owner Information: Name: RYAN BARNHARDT, ET AL Address 1: P.O. BOX 735	EVED 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: LAKIN State: KS Zip: 67860 +	
the KCC with a plat showing the predicted locations of lease roads, tan	odic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat
are preliminary non-binding estimates. The locations may be entered of Select one of the following:	on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the subject well is or will be I	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.
	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this give, 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	g fee with this form. If the fee is not received with this form, the KSONA-1-1 will be returned.
hereby certify that the statements made herein are true and correct to	o the best of my knowledge and belief
Date: 10/31/16 Signature of Operator or Agent: Manue	y A. The Julian Title: VICE-PRESIDENT

