# KANSAS CORPORATION COMMISSION 051717\_Quinn\_35.pdf OIL & GAS CONSERVATION DIVISION Form I

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: MUST be submitted	ed with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 17 May 2017			
Gas Lease: No. of Gas Wells 1	KS Dept of Revenue Lease No.: 231839 KR			
Gas Gathering System:	Lease Name: Quinn 35			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line	Sec. 35 Twp. 26 S R. 17 VE W			
feet from E / W Line	Legal Description of Lease: se/4 sec 35, T26S _ R17E			
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County: Allen			
Number of Injection Wells **	Production Zone(s): Riverton			
Field Name: Humbolt-Chanute	NI/A			
** Side Two Must Be Completed.	Injection Zone(s): IN/A			
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover OF Drilling			
Past Operator's License No. 32977 Exp. 1/30/17	Contact Person: Steven Tedesco			
Past Operator's Name & Address: Dorado Gas Resources LLC	Phone: 303-617-7242			
N/A	Date: 17 May 2017 KCC WICHITA			
Title:	Signature: JUN 0 2 2017			
	RECEIVED			
New Operator's License No. 33397 🗸	Contact Person: Steven Tedesco			
New Operator's Name & Address: Running Foxes Petroleum Inc	Phone: 303-617-7242			
4B Inverness Court East, Suite 120	Oil / Gas Purchaser: N/A			
Englewood, CO 80112	Date: 17 May 2017			
Title: President/CEO	Signature:			
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has beer			
	Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the				
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 pi			
Permit No.: Recommended action:	permitted by No.: ·			
	Date			
Date:	Date:			
/ / / / -	PRODUCTION JUN 0 / 2017 UIC 6-7-17			
Mail to: Past Operator New Operat				

#### Side Two

#### Must Be Filed For All Wells

	No.: 231839		***************************************	. // O OF TOOO   D:	175
Lease Name:	Quinn 35		* Location:S	se/4 Sec 35, T26S _ R	I/E
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
A 2	15-001-27882 🗸	660' Circle FSI FNL	660' Circle	Gas	Abandoned
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	***************************************	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	<u></u>	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	-48-01	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	KCC	WICHITA
		FSL/FNL	FEL/FWL	JUN (	<b>9 2</b> 2017
		FSL/FNL	FEL/FWL	RE	CEIVED
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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			FEL/FWL		
		FSL/FNL	FEL/FWL		

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

Form KSONA-1 July 2014 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 # 33397	Well Location:		
Name: Running Foxes Petroleum Inc	C SE SE Sec. 35 Twp. 26 S. R. 17 X East West		
Address 1: 4B Inverness Court East, Suite 120	County: Allen		
Address 2:	Lease Name. Quinn 35 Well #. A 2		
City: Englewood State: CO Zip: 80112 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: Steven Tedesco	the lease below:		
Phone: $(303)$ 617-7242 Fax: $(303)$ 617-7442			
City: Englewood State: CO Zip: 80112 + Contact Person: Steven Tedesco  Phone: (303) 617-7242 Fax: (303) 617-7442  Email Address: S.A.Tedesco14@runningfoxes.com	CHITA		
KCC AAA			
Phone: (303) 617-7242 Fax: (303) 617-7442  Email Address: S.A.Tedesco14@runningfoxes.com  **CC WIGHT Surface Owner Information:** Name: Jim L. Quinn	2011		
Surface Owner Information:  Name: Jim L. Quinn  Address 1: 24600 Brown Rd.	EVED When filing a Form T-1 involving multiple surface owners, attach an additional		
Name: Jim L. Quinn Address 1: 24600 Brown Rd.	sheet listing all of the information to the left for each surface owner. Surface		
Addices 1.	<ul> <li>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.</li> </ul>		
Address 2:	_		
City: State: 12 Zip: 21p: 4	-		
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:	ank batteries, pipelines, and electrical lines. The locations shown on the plat If on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
ociosi dile di ule londining.			
owner(s) of the land upon which the subject well is or will be	e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this , and email address.		
KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ess of the surface owner by filling out the top section of this form and e 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 C	ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.		
I hereby certify that the statements made herein are true and correct	the desired and the second and the Park		
Date: S/17/17 Signature of Operator or Agent:	President/CEO  Title:		