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 __3 Effective Date of Transfer: 01/01/2016 Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 131111 Gas Gathering System:_ Lease Name: STAHL Saltwater Disposal Well - Permit No.: ___ - NE/4 Sec. 31 Twp. 22S R. 19 VE W _____feet from N/ S Line Legal Description of Lease: _ feet from E / W Line 26 ACRES, MORE OR LESS, NE/4 SECTION 31 T22S R19E Enhanced Recovery Project Permit No.: County: ANDERSON Entire Project: Yes No Number of Injection Wells Production Zone(s): SQUIRRELL Field Name: COLONY-WELDA Injection Zone(s):___ ** Side Two Must Be Completed. __ feet from N / S Line of Section Surface Pit Permit No.: _ (API No. if Drill Pit, WO or Haul) E / W Line of Section Settling Haul-Off Workover Drilling Type of Pit: Emergency Burn ROBERT P BUKATY Past Operator's License No. Contact Person: Phone: 913-681-1690 VIVA INTERNATIONAL, INC Past Operator's Name & Address: _ 13200 METCALF AV, SUITE 200, OVERLAND PARK, KS 66213 Title: PRESIDENT/CEO Signature: Contact Person: __TOM MILLER 35285 New Operator's License No. New Operator's Name & Address: QUAD OPERATING, LLC Phone: 620-496-6652 2526 N FUNSTON ST Oil / Gas Purchaser: IOLA, KS 66749 Title: MEMBER Signature: Acknowledgment of Transfer: The above request for transfer of Injection authorization, surface pit permit #_ noted, approved and duty 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. the new operator of the above named lease containing the surface pit the new operator and may continue to inject fluids as authorized by . Recommended action: permitted by No.: ___ Date: Date: Authorized Signature Authorized Signature DISTRICT _ PRODUCTION

Mail to: Past Operator _

Side Two

Must Be Filed For All Wells

KDOR Lease	No.: 131111				,
* Lease Name:	STAHL		* Location:	NE/4 SECTION 31, T22	S, R19E
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr		Type of Weil (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-003-23498-0000	5145 FSD FNL	1558 FEL/FWL	OIL	PROD
2	15-003-23567-0000	4877 FSUFNL	1692 FELFWL	OIL	PROD
3	15-003-23669-0000	4568 FSLIFNL	1851 FELIFWL	OIL	PROD
partyristin disconnection and the second second		FSL/FNL	FEL/FWL	-	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	1	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEUFWL		
		FSL/FNL	FEUFWL		
		FSL/FNL	FEUFWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEUFWL		
		FSL/FNL	FEUFWL		
-		FSL/FNL	FEL/FWL	-	
		FSL/FNL	FEUFWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		Ja . 14			<u>, r</u>
A separate shee	t 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.

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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.

Name: VIVA INTERNATIONAL, INC Address 1: 13200 METCALF AV Address 2: SUITE 200 City: OVERLAND PARK State: KS Zip: 66213 + Contact Person: ROBERT P BUKATY Phone: (913) 681-1690 Fax: (913) 681-1694 Email Address: VIVAINTERNATIONAL@SBCGLOBAL.NET Email Address: VIVAINTERNATIONAL@SBCGLOBAL.NET Surface Owner Information: Name: PATRICK JUDGE Address 1: 1730 LORENZEN DR Address 1: 1730 LORENZEN DR County: ANDERSON Lease Name: STAHL Well #: If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: 26 ACRES MORE OR LESS NE/4 SECTION 31 TWP 22 SOUTH RANGE 19 EAST 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	OPERATOR: License # 5556	Well Location:		
Address 2: SUITE 200 City: OVERLAND PARK State: KS Zip: 66213 +	Name: VIVA INTERNATIONAL, INC			
Address 2: SUITE 200 City: OVERLAND PARK State: KS ZIp: 66213 +	Address 1: 13200 METCALF AV			
Contact Person: ROBERT P BUKATY Set-1690	Address 2: SUITE 200	Lagga Nama, STAHL		
Name: PATRICK JUDGE Address 1: 1730 LORENZEN DR RECEIVED Address 2:	City: OVERLAND PARK State: KS Zip: 66213 +	If filing a Form T.1 for multiple wells on a lease, enter the legal description of		
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Name: PATRICK JUDGE Address 1: 1730 LORENZEN DR RECEIVED Address 2:	Phone: (913) 681-1690 Fax: (913) 681-1694	26 ACRES MORE OR LESS NE/4 SECTION 31 TWP 22 SOUTH RANGE 19		
Name: PATRICK JUDGE Address 1: 1730 LORENZEN DR RECEIVE Address 2:	Email Address: VIVAINTERNATIONAL@SBOSLOBAL.NET	EAST		
Name: PATRICK JUDGE RECENSE Address 1: 1730 LORENZEN DR RECENSE RECENSE 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. City: SAN JOSE State: CA Zip: 95124 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 filled 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 theosing 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, For	KCC ANIO			
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