

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 \_\_\_\_\_ \*\*
- Gas Lease: No. of Gas Wells 1 \_\_\_\_\_ \*\*
- 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.: \_\_\_\_\_
- Entire Project:  Yes  No
- Number of Injection Wells \_\_\_\_\_ \*\*

Effective Date of Transfer: September 5, 2017  
 KS Dept of Revenue Lease No.: 226054/13703 137193 *h.e.*  
 Lease Name: Osage  
 \_\_\_\_\_ E/2 Sec. 5 Twp. 22S R. 14  E  W  
 Legal Description of Lease: N/2 NE/4 Sec. 5-22S-14E  
 County: Coffey  
 Production Zone(s): \_\_\_\_\_  
 Injection Zone(s): \_\_\_\_\_

Field Name: \_\_\_\_\_  
**\*\* Side Two Must Be Completed.**

Surface Pit Permit No.: \_\_\_\_\_  
 (API No. if Drill Pit, WO or Haul) \_\_\_\_\_ feet from  N /  S Line of Section  
 \_\_\_\_\_ feet from  E /  W Line of Section  
 Type of Pit:  Emergency  Burn  Settling  Haul-Off  Workover OR  Drilling

Past Operator's License No. 34954 Exp. 8/30/16  
 Past Operator's Name & Address: Encore Natural Resources, LLC  
PO Box 28760 Scottsdale, AZ 85255  
 Title: Manager

Contact Person: Dave Critchfield  
 Phone: 719-460-1390  
 Date: 8/16/2017  
 Signature: Dave Critchfield

RECEIVED  
 KANSAS CORPORATION COMMISSION  
 SEP 12 2017  
 CONSERVATION DIVISION  
 WICHITA, KS

New Operator's License No. 35498  
 New Operator's Name & Address: Osage Operating, LLC  
1102 N. Lenapah Ave  
Skiatook, OK 74070  
 Title: Manager

Contact Person: Travis Coody  
 Phone: 918-857-3003  
 Oil / Gas Purchaser: \_\_\_\_\_  
 Date: 9-1-17  
 Signature: Travis Coody

**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.

\_\_\_\_\_ is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: \_\_\_\_\_ . Recommended action: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 \_\_\_\_\_  
 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 01/12/18 PRODUCTION JAN 15 2018 UIC 1-16-18  
 Mail to: Past Operator \_\_\_\_\_ New Operator \_\_\_\_\_ District \_\_\_\_\_



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.*

Select the corresponding form being filed:  C-1 (Intent)  CB-1 (Cathodic Protection Borehole Intent)  T-1 (Transfer)  CP-1 (Plugging Application)

OPERATOR: License # 34954  
Name: Encore Natural Resources, LLC  
Address 1: PO Box 28760  
Address 2: \_\_\_\_\_  
City: Scottsdale State: AZ Zip: 85255 + \_\_\_\_\_  
Contact Person: Dave Critchfield  
Phone: ( 719 ) 460-1390 Fax: ( \_\_\_\_\_ ) \_\_\_\_\_  
Email Address: \_\_\_\_\_

Well Location:  
\_\_\_\_\_ - NE - NE Sec. 5 Twp. 22 S. R. 14  East  West  
County: Coffey  
Lease Name: Osage Well #: 39

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

N/2 NE/4 Sec. 5-22S-14E

RECEIVED  
KANSAS CORPORATION COMMISSION

SEP 12 2017

CONSERVATION DIVISION  
WICHITA, KS

**Surface Owner Information:**

Name: Glen R. Isch and Deborah K. Isch Trust  
Address 1: 795 Angus Rd SW  
Address 2: \_\_\_\_\_  
City: Gridley State: KS Zip: 66852 + \_\_\_\_\_

*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: 9-6-17 Signature of Operator or Agent: Dave Critchfield Title: Manager

Surface Owner Information for Sec. 5-22S-14E

Glen R. Isch and Deborah K. Isch Trust  
795 Angus Rd SW  
Gridley, KS 66852

RECEIVED  
KANSAS CORPORATION COMMISSION

SEP 12 2017

CONSERVATION DIVISION  
WICHITA, KS