Kansas Corporation Commission Oil & Gas Conservation Division

Form T-1
March 2010
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 subm | itted with this form. | | |
|--|---|--|--|
| ✓ Oil Lease: No. of Oil Wells** | Effective Date of Transfer: 01/01/2012 | | |
| Gas Lease: No. of Gas Wells** | KS Dept of Revenue Lease No.: 101786 Lease Name: Palmer Sec. 6 Twp. 27 R. 6 V E W Legal Description of Lease: E/2 NE/4 | | |
| Gas Gathering System: | | | |
| ✓ Saltwater Disposal Well - Permit No.: | | | |
| Spot Location: 3200 feet from N / ✓ S Line | | | |
| 600 feet from ✓ E / W Line | | | |
| Enhanced Recovery Project Permit No.: | | | |
| Entire Project: Yes No | County: Butler | | |
| Number of Injection Wells ** | Production Zone(s): Bartlesville | | |
| Field Name: Reynolds - Schaffer | | | |
| ** Side Two Must Be Completed. | Injection Zone(s): Arbuckie | | |
| Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul) | feet from N / S Line of Section | | |
| (All the Holling to Strady | feet from E / W Line of Section | | |
| Type of Pit: Emergency Burn Settling | Haul-Off Workover Drilling ∂ ℓ | | |
| Past Operator's License No6407 / | Contact Person:Dallas Flowers | | |
| Past Operator's Name & Address: Flowers Production Co., Inc. | Phone: 316-321-0550 Date: 12-13-2-014 | | |
| P.O. Box 249, El Dorado, KS 67042 | | | |
| Title: President | Signature: 2/4/1/2/1/4/2 | | |
| New Operator's License No. 34569 / | Contact Person: Dan Flowers | | |
| New Operator's Name & Address: Sonoma Resources LLC | Phone: 316-208-7590 | | |
| P.O. Box 384, El Dorado, KS 67042 | | | |
| | Oil / Gas Purchaser: Maclaskey Oilfield Services | | |
| | Date: 12-13-11 DEC 13 2011 | | |
| Title: President | Signature: 15 2011 | | |
| | KCC WICHITA | | |
| Acknowledgment of Transfer: The above request for transfer of injection | | | |
| 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. | | |
| Sonoma Resources LLC 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 pit | | |
| Permit No.: D-23.980 . Recommended action: | permitted by No.: | | |
| 3400 | | | |
| Date: 1-30-12 Authorized Signature | Date: Authorized Signature | | |
| DISTRICT SPR //27/12 | PRODUCTION UIC 1-30-12 | | |
| Mail to: Past Operator 1-30-V2 New Opera | 1 20 10 | | |

Side Two

Must Be Filed For All Wells

| * Lease Name: | Palmer | | * Location:E | E/2 NE/4 Sec 6-T27S-R | R6E, Butler Co., 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) |
| 3 | 15-015-19204 | 2970 Circle | 330 Circle | Oil | TA'D |
| 6 | 15-015-30119-00-01 1928 | 3200 FSL)FNL | 660 FEL/FWL | SWD | ACTIVE |
| | | FSL/FNL | FEL/FWL | | |
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| | | 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.