## 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, Check Applicable Boxes: MUST be submitted with this form, Oil Lease: No. of Oil Wells \_\_ Effective Date of Transfer: January 1, 2017 Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: Gas Gathering System: Lease Name: Blank #2 D21931.0 Saltwater Disposal Well - Permit No.: \_ SW \_ SW \_ NE Sec. 22 Twp. 28 R. 6 Spot Location: 3017 feet from N//S Line Legal Description of Lease: NE/4 Section 22-T28S-R6W 2237 feet from VE / W Line Enhanced Recovery Project Permit No.: \_ Entire Project: Yes No County: Kingman Number of Injection Wells Production Zone(s) Field Name: Hedrick West Arbuckle/Mississippi Injection Zone(s):\_ \*\* Side Two Must Be Completed. Surface Pit Permit No.: feet from S Line of Section (API No. if Drill Pit. WO or Haul) feet from W Line of Section Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling Past Operator's License No. Conrad J. Mirochna Contact Person: IAN 69 2017 Trek AEC, LLC Past Operator's Name & Address: Phone: 316-263-5785 Douglas RECEIVED Date: Title: Senior Vice-President, Operations Signature: 4706 🗸 New Operator's License No. -Contact Person: Jon F. Messenger New Operator's Name & Address: Messenger Petroleum, Inc. Phone: 620-532-5400 525 South Main Street Kingman, Kansas 67068 President Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #\_ 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. moleum Iuc 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 . Recommended action: None permitted by No.: \_\_ Date: Authorized Signature Authorized Signature DISTRICT UIC Mail to: Past Operator New Operator District 2

## Side Two

## Must Be Filed For All Wells

* Lease Name:	Blank #2		* Location:	SW SW NE Section 22-T2	88S-R6W, Kingman 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)
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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.