

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

032715_Dealy_INJ.pdf

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 _____ **
- ☐ Gas Lease: No. of Gas Wells _____ **
- ☐ Gas Gathering System: _____
- ☒ Saltwater Disposal Well - Permit No.: D-30920
- Spot Location: 2248 feet from ☒ N / ☐ S Line
- 1718 feet from ☐ E / ☒ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: Unknown - Dealy

**** Side Two Must Be Completed.**

Effective Date of Transfer: 3/27/15

KS Dept of Revenue Lease No.: NA

Lease Name: Dealy

NE - SW - SE - NW Sec. 31 Twp. 24S R. 9 ☐ E ☒ W

Legal Description of Lease: NE SW SE NW Sec 31-T24S-R9W

County: Reno

Production Zone(s): _____

Injection Zone(s): Arbuckle

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover OK ☐ Drilling

Past Operator's License No. 34715 /

Past Operator's Name & Address: Dorado E&P Partners, LLC
1401 17th Street #1100 Denver, CO 80202

Title: EVP - Engineering

Contact Person: Stephen T Harpham

Phone: 720-402-3700

Date: 3-26-2015

Signature: Stephen T Harpham

New Operator's License No. 34192 /

New Operator's Name & Address: _____

SandRidge Exploration and Production
123 Robert S Kerr Ave, Oklahoma City, OK 73102

Title: Regulatory Supervisor

Contact Person: Spence Laird

Phone: 405-429-6518

Oil / Gas Purchaser: N/A

Date: 4/17/15

Signature: Spence Laird

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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.

SandRidge Exploration and Production LLC is acknowledged as

the new operator and may continue to inject fluids as authorized by

Permit No.: D-30920 . Recommended action: None

Date: 4-30-15 Cheryl L Bayer
Authorized Signature

_____ is acknowledged as

the new operator of the above named lease containing the surface pit

permitted by No.: _____ .

Date: _____
Authorized Signature

DISTRICT _____	BPR <u>4-29-15</u>	PRODUCTION <u>5-4-15</u>	UIC <u>4-30-15</u>
Mail to: Past Operator <u>4-30-15</u>	New Operator <u>4-30-15</u>	District <u>2</u>	<u>4-30-15</u>

* Lease Name: Dealy * Location: NE SW SE NW 31-T24S-R9W

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* 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.

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

OPERATOR: License # 34192
Name: SandRidge Exploration and Production, LLC
Address 1: 123 Robert S Kerr Ave
Address 2: _____
City: Oklahoma City State: OK Zip: 73102 + _____
Contact Person: Spence Laird
Phone: (405) 429-6518 Fax: (_____) _____
Email Address: _____

Well Location:
NE SW SE NW Sec. 31 Twp. 25S S. R. 9 ☐ East ☒ West
County: Reno
Lease Name: Dealy Well #: 1

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

Surface Owner Information:

Name: Dealy Family Trust
Address 1: 10607 S. Jordan Springs Rd
Address 2: _____
City: Sylvia State: KS Zip: 67581 + _____

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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: 3/26/2015 Signature of Operator or Agent: Aaron Reyna Title: AARON REYNA, SUP Appraisal & NV