

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

082917_Kaufman_INJ.pdf Form T-1
April 2004
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**

Check Applicable Boxes:

- ☒ Oil Lease: No. of Oil Wells 10 6 oil **
☐ Gas Lease: No. of Gas Wells _____ **
☐ 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.: E 23339 ✓
Entire Project: ☐ Yes ☐ No
Number of Injection Wells 4 **
Field Name: Humboldt - Chanute ✓

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

Effective Date of Transfer: AUGUST 29, 2017
KS Dept of Revenue Lease No.: 114119 ✓
Lease Name: Kaufman ✓
Sec. 33 Twp. 25S R. 18 ☒ E ☐ W ✓
Legal Description of Lease: * NE 1/4 of Sec. 33 - Twp 25S, R 18E
County: Allen ✓
Production Zone(s): Bevier Coal Bed
Injection Zone(s): _____

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)
Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover OR ☐ Drilling
Past Operator's License No. 34525 Exp. 3/30/17
Past Operator's Name & Address: Tontol LLC
7807 E. Buena Terra Way
Scottsdale AZ 85250
Title: Managing Member
Contact Person: Donald Bisbee
Phone: 480 433 3880
Date: 9/25/17
Signature: [Signature]
Received
KANSAS CORPORATION COMMISSION
OCT 23 2017
CONSERVATION DIVISION
WICHITA, KS

New Operator's License No. 35488 ✓
New Operator's Name & Address: Micro Oil LLC
10721 S. Thornton Road
Casa Grande AZ 85193
Title: Managing Member
Contact Person: R.L. Anderson
Phone: 520-509-9579
Oil / Gas Purchaser: MacLuskey Oilfield Services Inc
Date: 9/25/17
Signature: [Signature]

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.

Micro Oil LLC is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: E-23,339. Recommended action: None

Date: 11-21-17 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 _____ EPR 11/20/17 PRODUCTION 11-21-17 UIC 11-21-17
Mail to: Past Operator 11-21-17 New Operator 11-21-17 District 3

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

* Lease Name: Kaufman

* Location:

NE/4 33-25-18E

* Rootages - Well Inventory

Received
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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.

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form KSONA-1

July 2014

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Form must be Signed

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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 # 35488
Name: MICRO OIL LLC
Address 1: 7807 S. Thornton Rd
Address 2: _____
City: Casa Grande State: AZ Zip: 85193 + _____
Contact Person: R.L. Anderson
Phone: (520) 509-9579 Fax: (____) _____
Email Address: _____

Well Location:
____ - ____ - NE 1/4 Sec. 33 Twp. 25 S. R. 18 ☒ East ☐ West
County: ALLEN
Lease Name: Kaufman Well #: _____

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

*NE 1/4 of Sec. 33, Twp 25S, R 18E

Surface Owner Information:

Name: MONARCH Cement
Address 1: PO BOX 1000
Address 2: _____
City: Humboldt State: KS Zip: 66748 + 1000

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: 9-25-17 Signature of Operator or Agent: R. Anderson Title: Managing Member