KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION 100117_Thrasher_INJ.pdf Form must be Typed Form must be Typed

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REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form KSONA-1, Certification of Compliance with the Kansas S

	itted with this form.			
Oil Lease: No. of Oil Wells 12	Effective Date of Transfer:			
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 172340 VLR			
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:	Lease Name: HadL			
Spot Location: feet from N / S Line				
feet from E W Line	Legal Description of Lease: the E/z and the NU/Z of the			
Enhanced Recovery Project Permit No.: No Vermit	Nulla less the west 10 occes of said vuly in Sec 36 Tis Re			
Entire Project: Yes No	County: Douglas R20E			
Number of Injection Wells **	Production Zone(s): Squissel			
Field Name: Jayhank				
** Side Two Must Be Completed.	Injection Zone(s): Squirre!			
Surface Pit Permit No.:	feet from N / S Line of Section			
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover OR Drilling			
Past Operator's License No. 34942 Exp. 7/30/15	Contact Person: James Roberts			
Past Operator's Name & Address: Magnum Exp. of Kansas, Llo	Phone: 817-881-9040			
2712 Willow Livek Court, BeHord Tx 76021	Phone: 817-881-1098 KCC WICHITA			
Title: Operato R	DCT 16 2017			
Title.	Signature: RECEIVED			
New Operator's License No. 35503	Contact Person: Remino & Inte			
New Operator's Name & Address: MIDSTATES ENERGY	2.2.2.14/4.14.806			
OFFICATING, LLC SSTI HALTERX AVE.	9/2/2			
FOR MYERS, FL 33912				
Title: OPERMAN	Signature:			
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # has been			
	Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest in the a				
	The state of the partial state of the state			
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.: Negommended action:	permitted by No.:			
Need Apolications				
Date:	Date:			
Authorized Signature	Authorized Signature			
DISTRICT	PRODUCTION UIC 10-20-1			
ivew Operator	pr District			

Must Be Filed For All Wells

KDOR Leas	e No.: 122370			= 1/2	
* Lease Name	HadL		Location:	w/4 Sec 36	Tup 13 RZOE
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet f	Section Line rom South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
6	15-045-21009	4570 Circle	4785 Circle	oil	Prod.
10	15-045-21341	4125 (F)L/FNL	3865 FEL FWL	oil	PRod.
	15-045-21351	5115 FSI/FNL	4785 FEL/FWL	0:1	Prod.
12	15-045-21354	4455 FS /FNL	3465 (EL) FWL	oil	Prad.
Z	15-045-20560/	5115 (F\$L/FNL	3215 (FEI)/FWL	011	Prod.
3	15-645 - 1905B V	5055 FAL/FNL	2805 FAL/FWL	oil	Prod.
4	15-045-20706	4125 FSUFNL	4785 FED FWL	0:1	Prod.
5	15-045- 20709			0:1	Prod.
フ	15-045-21350			011	Prod.
9	15-045-21340		4195 FEL/FWL	oil	Prod.
13	15-045-22051			oil	Prod.
14	15-045- ZZ050V			oil	Prod.
I-1	15-045-22052	4750 (FSTYFNL	4590 FEL/FWL	Inj	Inactive
I-2	15-045-22049	4290 FSLIFNL	4590 (FE)/FWL	Inj	and Inactive
	<u></u>	FSL/FNL	FEL/FWL	, , , , , , , , , , , , , , , , , , ,	
		FSL/FNL	FEL/FWL		
* NO	Permit - Need	FSL/FNL	FEL/FWL		KCC WICHITA
Appli	Permit - Need cations	FSL/FNL	FEL/FWL	,	
		FSL/FNL	FEL/FWL		RECEIVED
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		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.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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Form KSONA-1

January 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 (C	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 34942 Name: Machum Exp. of Kansas UC Address 1: 2 H 7 Willow Creek Court Address 2: City: Beckford State: X zip: 74074+ Contact Person: James Roberts Phone: (817) 881 - 9045 Fax: (Well Location:
70 70	
Surface Owner Information: Name: Vernon Had RECEIVE	
Address 1: 1925 N. 1000 Rd.	When filing a Form T-1 involving multiple surface owners, attach an additiona 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
Address 2:	county, and in the real estate property tax records of the county treasurer.
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:	the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be loc CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KC	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this d email address. knowledge that, because I have not provided this information, the per(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	ee with this form. If the fee is not received with this form, the KSONA-1 will be returned.
I hereby certify that the statements made herein are true and correct to the	he best of my knowledge and belief.
Date: 9111 Signature of Operator or Agent: 4	Title: Operator
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