KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form I-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: Effective Date of Transfer: Oil Lease: No. of Oil Wells __ Gas Lease: No. of Gas Wells 1 KS Dept of Revenue Lease No.: 231030 Gas Gathering System: Lease Name: Bleess-McFaddin 7-1 Saltwater Disposal Well - Permit No.: ___ _<u>SE__SW__NW_Sec._7__Twp._33S_R._39__</u> feet from N/ S Line Legal Description of Lease: ___ __ feet from __ E / __ W Line NW/4 Enhanced Recovery Project Permit No.: _ County: Morton Entire Project: Yes No Number of Injection Wells, Morrow Production Zone(s): Field Name: Unknown N/A Injection Zone(s): ** Side Two Must Be Completed. _ feet from N / S Line of Section Surface Pit Permit No.: __ (API No. if Drill Pit, WO or Haul) E / W Line of Section 1 Drilling Burn Settling Haul-Off Workover Type of Pit: Emergency Joel L. Pettit Past Operator's License No. Contact Person: _ Past Operator's Name & Address: __EOG Resources, Inc. Phone: 405.246.3132 Date: ____5/15/2013 3817 NW Expressway, Suite 500, Oklahoma City, OK 73112 Title: Division Operations Manager Signature: RECEIVED KANSAS CORPORATION COMMISSION Contact Person: Cecil O'Brate New Operator's License No. 34904 Phone: 620.275.9231 New Operator's Name & Address: Palmer Oil, Inc. 3119 North Cummings Road, P O Box 399, Garden City, KS 67846 DCP Midstream Oil / Gas Purchaser: **CONSERVATION DIVISION** WICHITA, KS 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. _ 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: permitted by No.: _ Authorized Signature DISTRICT -Mail to: Past Operator_ District **New Operator**

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

Must Be Filed For All Wells

KDOB I pass	No.: 231030	The state of the s			
		*Location: Section 7-33S-39W			
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)
7-1	15-12921852 🗸	2310 Circle	990 Circle	Gas	Prod
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL			
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		24 (4) (54) - 13 (4) (4) (4) (5)
		FSL/FNL	FEL/FWL	-	
		FSL/FNL	FEL/FWL	***************************************	
		FSL/FNL	FEUFWL		
		FSL/FNL	FEL/FWL		
		FSUFNL	FEL/FWL		
				<u> </u>	
		FSL/FNL	FEI/FWL		
	A 11 West 1971				
		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 coverement that one section please indicate which section each well is located.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1
July 2010
Form Must Be Typed
Form must be Signed
All blanks must be Filled

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.

OPERATOR: License # 5278	Well Location:		
OPERATOR: License # 5278 Name: EOG RESOURCES, INC.	SE_SW_NW_Sec. 7 Twp. 33 S. R. 39 East 🗵 West		
Address 1: 3817 NW EXPRESSWAY, SUITE 500	County: MORTON		
Address 2:	Lease Name: BLEESS-MCFADDIN Well #: 7 #1		
City: OKLAHOMA CITY State: OK 7ip: 73112 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: DAWN ROCKEL	the lease below:		
City: OKLAHOMA CITY State: OK Zip: 73112 + Contact Person: DAWN ROCKEL Phone: (405) 246-3226 Fax: (405) 246-3227			
Email Address:			
Surface Owner Information:			
Name:	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: Con Cail Bleess & Monzella McFaddin	sheet listing all of the information to the left for each surface owner. Surface		
Address 2: Con Ceil Bleess & Monzelle McFaddin c/o Bill Graybill	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.		
City: P.O. Box 898			
Elkhart, KS 67950			
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 low CP-1 that I am filing in connection with this form; 2) if the form beform; and 3) my operator name, address, phone number, fax, and account of the control	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form reing filed is a Form C-1 or Form CB-1, the plat(s) required by this		
□ I have not provided this information to the surface owner(s). I ac KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling	ner(s). To mitigate the additional cost of the KCC performing this		
If choosing the second option, submit payment of the \$30.00 handling to form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	fee 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 best of my knowledge and belief.		
I hereby certify that the statements made herein are true and correct to Date: 4/1/2013 Signature of Operator or Agent:	the best of my knowledge and belief. Title: SR. OPERATIONS ASSISTANT		

MAY 2 1 2013