KOLAR Document ID: 1413490

## 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, MUST be submitted with this form.

Check Applicable Boxes: MUST be subm	itted with this form.			
Oil Lease: No. of Oil Wells**	KS Dept of Revenue Lease No.:			
Gas Lease: No. of Gas Wells**				
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:	Lease Name:			
Spot Location: feet from N / S Line feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County:			
Number of Injection Wells **	Production Zone(s):			
Field Name:				
** Side Two Must Be Completed.	Injection Zone(s):			
2000 000 0000				
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 Drilling			
Pact Operator's License No.	Contact Person:			
Past Operator's License No.	Contact Person:			
Past Operator's Name & Address:	Phone:			
	Date:			
Title:	Signature:			
New Operator's License No.	Contact Person:			
New Operator's Name & Address:	Phone:			
	Oil / Gas Purchaser:			
	Date:			
Title:	Signature:			
Acknowledgment of Transfer: The above request for transfer of injection	n authorization, surface pit permit # has been			
noted, approved and duly recorded in the records of the Kansas Corporation	n 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			
Permit No.: Recommended action:	permitted by No.:			
Date: Authorized Signature	Date:			
DISTRICT EPR	PRODUCTION UIC			
DISTRICT EFF	THOUSE HON			

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#### Side Two

#### Must Be Filed For All Wells

Lease Name:	KDOR Lease No.:					
(YR DRLD/PRE '67)         (i.e. FSL = Feet from South Line)         (Oi/Gas/INJ/WSW)         (PROD/TA/D/Abandoned)           Circle         FSL/FNL         FEL/FWL         FSL/FNL	* Lease Name: _			* Location:		
FSUFNL	Well No.					
FSUFNL   FEUFWL						-
FSUFNL   FEUFWL   FSUFNL   F			FSL/FNL	FEL/FWL		_
FSUFNL   FEUFWL			FSL/FNL	FEL/FWL		
FSUFNL   FELIFWL			FSL/FNL	FEL/FWL		
FSL/FNL   FEL/FWL			FSL/FNL	FEL/FWL		
FSL/FNL   FEL/FWL			FSL/FNL	FEL/FWL		
FSUFNL   FEUFWL			FSL/FNL	FEL/FWL		
FSL/FNL   FEL/FWL			FSL/FNL	FEL/FWL		
FSL/FNL   FEL/FWL			FSL/FNL	FEL/FWL		
FSL/FNL			FSL/FNL	FEL/FWL		
FSL/FNL   FEL/FWL			FSL/FNL	FEL/FWL		
FSL/FNL   FEL/FWL   FSL/FNL   FSL/FNL   FSL/FNL   FSL/FNL   FSL/FNL   FSL/FWL   FSL/FNL   FSL/FWL   FSL/FWL   FSL/FWL   FSL/FNL   FSL/FWL   FSL/			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
FSL/FNL FEL/FWL FEL/FWL FSL/FNL FEL/FWL			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
			FSL/FNL	FEL/FWL		
FSL/FNLFEL/FWL			FSL/FNL	FEL/FWL		_
			FSL/FNL	FEL/FWL		
FSL/FNL FEL/FWL			FSL/FNL	FEL/FWL		
				FEL/FWL		
			FSL/FNL	FEL/FWL		
FSL/FNLFEL/FWL						

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.

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## Kansas Corporation Commission Oil & Gas Conservation Division

Form KSONA-1
July 2014
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.

Select the corresponding form being filed: C-1 (Intent) CB-	-1 (Cathodic Protection Borehole Intent) T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License #			
Name:			
Address 1:			
Address 2: State: Zip:+			
Contact Person:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Phone: ( ) Fax: ( )			
Email Address:	- -		
Surface Owner Information:			
Name:	_ When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1:	sheet listing all of the information to the left for each surface owner. Surface		
Address 2:	county and in the real estate property toy records of the county traceurer		
City: State: Zip:+	_		
the KCC with a plat showing the predicted locations of lease roads, to	thodic Protection Borehole Intent), you must supply the surface owners and ank batteries, pipelines, and electrical lines. The locations shown on the plat d on 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 owner(s) of the land upon which the subject well is or will be	e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this c, and email address.		
KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ess of the surface owner by filling out the top section of this form and he KCC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handli form and the associated Form C-1, Form CB-1, Form T-1, or Form C	ing fee with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned.		
I hereby certify that the statements made herein are true and correct	t to the best of my knowledge and belief.		
Date: Signature of Operator or Agent:	Title:		

### **ASSIGNMENT OF OIL & GAS LEASE**

State

: Kansas

County

: Neosho County

Assignor

: Shallow Sands, LLC

Assignor's Address

: 414 SE Washington Blvd, PMB 148, Bartlesville, OK 74006

Assignee

: SEE Oil

Assignee's Address

: 315 N Washington

**Date Executed** 

: 5-27-2011

**Effective Date** 

: 5-27-2011

For TEN AND NO/100 (\$10.00) DOLLARS and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, Grantor named above hereby ASSIGNED, TRANSFERRED AND CONVEYED to Grantees named above, all their right, title and interest in and to that certain oil and gas lease described below, INSOFAR AND ONLY INSOFAR as said Oil and Gas Lease covers the following described lands;

NW4 NE4/NE4 NW4 Less Rd, Sec 30 Twp 28, R 20E containing 80 acres more or less

This assignment is made subject to all of the terms, conditions and obligations contained in said Oil and Gas Lease.

Assignor covenants with the Assignee, it's successors or assigns; That the Assignor is the lawful owner of and has good title to the interest above assigned in and to said leases, free and clear from all leins, or adverse claims; That said leases are valid and subsisting leases in the land described and all conditions to keep same in full force have been duly performed; And the undersigned will warrant and defend same against the lawful claims and demands of all persons whomsoever, by through and under Assignor, but not otherwise.

Kaula Wilcon

Date

Tax ID

### SINGLE ACKNOWLEDGMENT

THE STATE OF OKLAhoma
country of Washington

BE IT REMEMBERED that on this 27 day of May, 2011, before me, a Notary Public in and for the County and State aforesaid, came <u>Kayla Luilson</u>, who is personally known to me to be the same person who executed the within instrument of writing and such person duly acknowledged the execution of the same to be his free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal the day and year last above written.