030116_PXP_75.pdf

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:

☐ Oil Lease: No. of Oil Wells Cathodic Protection Bore Hole - 1 **

☐ Gas Lease: No. of Gas Wells NA **

☐ Gas Gathering System: NA

☐ Saltwater Disposal Well - Permit No.: NA

Spot Location: 2412 feet from ☐ N / ☑ S Line

50 feet from ☑ E / ☐ W Line

☐ Enhanced Recovery Project Permit No.: NA

Entire Project: ☐ Yes ☐ No

Number of Injection Wells NA **

Field Name: NA

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

Effective Date of Transfer: 03-01-16

KS Dept of Revenue Lease No.: NA

Lease Name: PXP #75 - Well #1

___ - SW - SW - NW Sec. 19 Twp. 01S R. 32 ☐ E ☑ W

Legal Description of Lease: NW/4 Of Section #19-T01S-R32W

County: Rawlins Co., KS

Production Zone(s): NA

Injection Zone(s): NA

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

NA feet from ☐ N / ☐ S Line of Section

NA feet from ☐ E / ☐ W Line of Section

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

Past Operator's License No. #34002 Exp. 8/30/13

Past Operator's Name & Address: Kinder Morgan Interstate Gas Transmission ~~Co~~ LLC

145 N. Country Club Drive - Colby, KS 67701

Title: Chief Executive Officer

Contact Person: Mark Bredemeier

Phone: 785-462-6815-ext. 223 - Cell - 785-269-7003

Date: 8-3-16

Signature:

New Operator's License No. #34952

New Operator's Name & Address: Tallgrass Interstate Gas Transmission ~~Co~~ LLC

145 N. Country Club Drive

Colby, KS 67701

Title: President and Chief Operating Officer

Contact Person: Mark Bredemeier

Phone: 785-462-6815 - ext. 223 - Cell - 785-269-7003

Oil / Gas Purchaser: NA

Date: 8-3-16

Signature:

KCC WICHITA
AUG 12 2016
RECEIVED

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # NA 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.

_____ is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: _____. Recommended action: _____

Date: _____ *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 9/23/16 PRODUCTION 9-26-16 UIC SEP 26 2016

Mail to: Past Operator _____ New Operator _____ District _____

Side Two

Must Be Filed For All Wells

KDOR Lease No.: NA

* Lease Name: PXP #75 - Well #1 * Location: NW/4 19-T01S-R32W - Rawlins Co., KS

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)
#1	15-153-20845-0000	2412 Circle FSL/FNL	50 Circle FEL/FWL	Cathodic Bore Hole	Active
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

KCC WICHITA
AUG 12 2016
RECEIVED

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.

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Form KSONA-1
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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 # 34952
Name: Tallgrass Interstate Gas Transmission, ~~Co.~~ LLC
Address 1: 145 N. Country Club Drive
Address 2:
City: Colby State: KS Zip: 67701 + ____
Contact Person: Mark Bredemeier
Phone: (785) 462-6815-ext 223 Fax: (785) 462-7433
Email Address: mark.bredemeier@tallgrassenergylp.com

Well Location:
___ SW SW NW Sec. 19 Twp. 01 S. R. 32 ☐ East ☒ West
County: Rawlins
Lease Name: PXP #75 Well #: 1

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

KCC WICHITA
AUG 12 2016
RECEIVED

Surface Owner Information:
Name: Robert J. Jr. And Rebecca Simminger
Address 1: 4037 Road 25
Address 2:
City: Ludell State: KS Zip: 67744 + ____

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: 02-29-16 Signature of Operator or Agent: Mark Bredemeier Title: Corrosion Technician