RE**CEIVE**D JUL 1 2 2010

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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:	1
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 07/01/2010
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 119256/209760 Vy
Gas Gathering System:	Lease Name: COSGROVE A-2
Saltwater Disposal Well - Permit No.:	CNESE_Sec. 22 Twp. 33 R. 34EVW
Spot Location: 1980 feet from N / KS Line	Legal Description of Lease: SE/U of 22-33-34u
feet from VE / W Line	Legal Description of Lease: 12 / 4 0)
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: SEWARD
Number of Injection Wells***	CHESTED
Field Name: SHUCK	<u> </u>
ide the Mas Accomplant	Injection Zone(s):
	feet from N/ S Line of Section
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	
	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Oil Workovel Dimings
Past Operator's License No. 32446 /	Contact Person: Lynne Moon RECEIVED
Past Operator's Name & Address: Merit Energy Company	Phone: 972-628-1569 SEP 0 2 2010
13727 Noel Road, Suite 500 Dallas, Texas 75240	Date: _07/01/2010
	Signature Signature KCC WICHITA
Title: Regulatory Manager	Signature
New Operator's License No. 34408	Contact Person: Randall K. Click
	Phone: 214-291-9987
New Operator's Name & Address: Cisco Operating, LLC	
6900 N. Dallas Parkway Suite 740 Plano, Texas 75024	Oil / Gas Purchaeers
	Date: 07/01/018
Title: President	Signature: William Signature:
Acknowledgment of Transfer: The above request for transfer of injection	n authorization, surface pit permit # has been
	oration Commission. This acknowledgment of transfer pertains to Kansas
Corporation Commission records only and does not convey any ownershi	
is acknowleged as the	is acknowleged as the
new operator and may continue to inject fluids as authorized by	new operator of the above named lease containing the surface pit
Permit No.: Recommended action:	permitted by No.:
Date:	Date:
Authorized Signature	Authorized Signature
DISTRICT EPR 10-15-10	PRODUCTION /0//8//0 UIC 10-18-LO
Mail to: Past Operator New Operator	District —————



Side Two

13.13

Must Be Filed For All Wells

	e No.: 119256/209760		-	EC 22 T228 B24M	
* Lease Name	: COSGROVE A-2		Location: S	EC.22-T33S-R34W	
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet	Section Line from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
A-2	15-175-20402 /	1980 FSLIFNL	660 FELFWL	OIL	TA'D
	· · · · · · · · · · · · · · · · · · ·	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
······································		FSL/FNL	FEL/FWL	All Carrier Strains	30 <u>4 - 13 - 1</u>
	<u></u>	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
· · · · · · · · · · · · · · · · · · ·		FSL/FNL	FEL/FWL		
·		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		<u> </u>
		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/FNL	FEL/FWL	<u> </u>	
		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

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 #32446	Well Location:		
Name: Merit Energy Company	C_NE_SESec. 22 Twp. 33 S. R. 34 East 4 West		
Address 1: 13727 Noel Rd. Suite 500	County: SEWARD		
Address 2:	Lease Name: COSGROVE A-2 Well #: A-2		
City: Dallas State: TX Zip: 75240 +			
Contact Person: Lynne Moon	the lease below:		
Phone: (972) 628-1569 Fax: (972) 628-1869			
Email Address: lynne.moon@meritenergy.com	SEP 0 2 2010		
Surface Owner Information:	KCC WICHITA		
Name:CENTRAL PLAINS FARMING LLC	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		
Address 1: PO BOX 128			
Address 2:	county, and in the real estate property tax records of the county treasurer.		
City: PLAINS State: KS Zip: 67869 +			
If this form is being submitted with a Form C.1 (Intent) or CR-1 (Cath	nodic Protection Borehole Intent), you must supply the surface owners and		
the KCC with a plat showing the predicted locations of lease roads, ta	nodic Protection Borehole Intent), you must supply the surface owners and nk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
the KCC with a plat showing the predicted locations of lease roads, ta are preliminary non-binding estimates. The locations may be entered Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax,	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form CB-1, Form T-1, or Form a being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the powner(s). To mitigate the additional cost of the KCC performing this		
the KCC with a plat showing the predicted locations of lease roads, ta are preliminary non-binding estimates. The locations may be entered Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling.	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the pwner(s). To mitigate the additional cost of the KCC performing this ag fee, payable to the KCC, which is enclosed with this form.		
the KCC with a plat showing the predicted locations of lease roads, ta are preliminary non-binding estimates. The locations may be entered Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling the second option, submit payment of the \$30.00 handling the second option, submit payment of the \$30.00 handling the second option, submit payment of the \$30.00 handling the second option.	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form T-1, or Form a being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the bowner(s). To mitigate the additional cost of the KCC performing this and fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 will be returned.		