RECEIVED JUL 1 2 2010 KCC WICHITA

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:				
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 07/01/2010			
Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: 217005			
Gas Gathering System:	Lease Name: LINDNER 1-5			
Saltwater Disposal Well - Permit No.:				
Spot Location: 2310 feet from N / S Line	NESW Sec. 5 Twp. 24 R. 38 EVW			
feet fromf	Legal Description of Lease: SW/4 7 5-24-38 W			
Enhanced Recovery Project Permit No.:	RECEIVE			
Entire Project: Yes No	County: KEARNY			
Number of Injection Wells**	Production Zone(s): CHASE GROUP			
Field Name: HUGOTON GAS AREA	KCC /MCLI			
Side Two Musi Be Completed.	Injection Zone(s):			
Confine Dit Devenit No.	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-Off Workover Drilling			
, production of the control of the c	Tradi-Oil Workover Drining			
Past Operator's License No. 32446	Contact Person: Lynne Moon			
Past Operator's Name & Address: Merit Energy Company	Phone: 972-628-1569			
13727 Noel Road, Suite 500 Dallas, Texas 75240 RECEIVED	Date: _07/01/2010			
Title: Regulatory Manager AUG 1 8 2010	Signature: Sign Moor			
New Operator's License No. 34408 / KCC WICHITA	Contact Person: Randall K. Click			
New Operator's Name & Address: Cisco Operating, LLC	Phone: 214-291-9987			
6900 N. Dallas Parkway Suite 740 Plano, Texas 75024				
OSCO W. Daniel Farmary Control For Control	Oil / Gas Purchaser:			
	Date: 07/01/2010			
Title: President	Signature: U Succession Control of the Control of t			
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been			
noted, approved and duly recorded in the records of the Kansas Corpor	ration 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 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:			
101240	PRODUCTION 10/14/10 uic 10-14-10			
DISTRICT EPR 104310 New Operator New Operator	District —————			

SCANNED

Must Be Filed For All Wells

	e No.: 217005					
Lease Name: LINDNER 1-5			* Location: SEC.5-T24S-R38W			
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)	
1-5	15-093-00352 ✓	2310 FSL)FNL	2970 Circle FEL FWL	GAS	PROD	
	<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			
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		FSL/FNL				
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		FSL/FNL	FEL/FWL		e de.	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		<u> </u>	
		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

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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

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 #32446	Well Location:		
Name: Merit Energy Company			
Address 1: 13727 Noel Rd. Suite 500	County: Kearny		
Address 2:	Lease Name: Lindner	_ Well #:1-5	
City:Dallas State:TX Zip:75240+ Contact Person:Lynne Moon	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Phone: (972) 628-1569 Fax: (972) 628-1869	RECEIVED	AUG 1 1 201	
Email Address: 1ynne.moon@meritenergy.com	AUG 1 8 2010	KCC WICHIT	
Surface Owner Information:	KCC WICHITA		
Name: See Attached	When filing a Form T-1 involving multiple surface owners, attach an additiona		
Address 1:	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.	
City:			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathod the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered or Select one of the following:	batteries, pipelines, and electrical lines. The local	ations shown on the plat	
I certify that, pursuant to the Kansas Surface Owner Notice Acountries owner(s) of the land upon which the subject well is or will be loced. 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 will be supported by the contribution of the contr	cated: 1) a copy of the Form C-1, Form CB-1, feing filed is a Form C-1 or Form CB-1, the plat(nd email address.	Form T-1, or Form s) required by this	
I have not provided this information to the surface owner(s). I acknowledge that I am being charged a \$30.00 handling	ner(s). To mitigate the additional cost of the KC	C performing this	
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	fee with this form. If the fee is not received with will be returned.	this form, the KSONA-1	
I hereby certify that the statements made herein are true and correct to			
Date: 07/01/2010 Signature of Operator or Agent	Title: Regulato:	ry Manager	

Lindner 1-5

NE NE SW Sec. 5-T24S-R38W Kearny Co., KS

Post Corporation 1308 W. Braxton Dr. Sioux Falls, South Dakota 57108

Kenneth & Judy Anderson 1679 Rd 110 Lincoln, KS 67860

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