RECEIVED
AUG \$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

CC WICHITA Check Applicable Boxes:	ON SURFACE PIT PERIVIT
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: August 1, 2010
✓ Gas Lease: No. of Gas Wells 1 **	
Gas Gathering System:	KS Dept of Revenue Lease No.: 205507
Saltwater Disposal Well - Permit No.:	Lease Name: ADAMS RANCH 1-11
Spot Location:feet from N / S Linefeet from E / W Line	
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: MEADE
Number of Injection Wells**	Production Zone(s): MORROW LOWER
Field Name: Cimarron Bend	
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section
Type of Pit: Emergency Burn Settling	feet from []E / [] W Line of Section Haul-Off [] Workover [] Drilling
, county	Haul-Off Workover Drilling
Past Operator's License No. 34265 /	Contact Person: Charles Gibson
Past Operator's Name & Address: Encore Operating, L.P.	Phone:800-364-5482
777 Main St. Ste 1400 Fort Worth, Texas 76102	Date: July 22, 2010
Title: V. P. Wetsern Region	Signature: Chal Qi
New Operator's License No. 34399/	Contact Person: Gregroy S. Roden RECEIVED
New Operator's Name & Address: Quantum Resources Management LLC	Phone: 713-452-2200
5 Houston Center, 1401 McKinney St Ste 2400	Oil / Gas Purchaser: Tristor Gas Market
Houston, Texas 77010	Date: July 12, 2010 KCC WICHITA
Title: General Counsel	Signature:
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kennes Corne	
Corporation Commission records only and does not convey any ownership	ration Commission. This acknowledgment of transfer pertains to Kansas o 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:
Authorized Signature	Authorized Signature
Admitted the second of the sec	PRODUCTION 11-16-10 UIC 11-10-10
Mail to: Past Operator New Operator	District

Side Two

SCANNED,

Must Be Filed For All Wells

* Lease Name	ADAMS RANCH 1-11	* Location: SEC 11-35S-29W		
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)
1-11	15-119-30075	Circle Circle 29 <u>70FSL</u> FSL/FNL6 <u>60FEL</u> FEL/F	/ ' / L'	PROD
		FSL/FNL FEL/F	FWL	
		FSL/FNLFEL/F	-WL	
		FSL/FNLFEL/f	-WL	
		FSL/FNL FEL/I	-WL	
		FSL/FNL FEL/I	-WL	
		FSL/FNL FEL/I	FWL	
		FSL/FNL FEL/	FWL	-
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		FSL/FNL FEL/		

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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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1
July 2010
Form Must Be Typed
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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.

OPERATOR: License # 34265	Well Location:	
Name: ENCORE OPERATING, L.P.	S2_SE_NE_Sec. 11 Twp. 35_S. R. 29 East 🗷 West	
Name: ENCORE OPERATING, L.P. Address 1: 777 MAIN STREET, STE. 1400		
Address 2:	Lease Name: ADAMS RANCH	
City: FORT WORTH State: TX Zip: 76102	If filing a Form T.1 for multiple wells are a least at the least at th	
Contact Person: ANN BURDETTE WILEY	If filing a Form T-1 for multiple wells on a lease, enter the legal description o the lease below:	
City: FORT WORTH State: TX Zip: 76102 + Contact Person: ANN BURDETTE WILEY Phone: (817)) 877-9955 Fax: (817) 877-1655		
Email Address:		
Surface Owner Information: Name: JAD RANCH LLC	When filing a Form T-1 involving multiple surface owners, attach an additiona.	
Address 1: 11062 GG ROAD	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 county, and in the real estate property tax records of the county treasurer.	
Address 2:	, , ,	
are preliminary non-hinding estimates. The locations may be entered	IK DATTERIES DIDELINES and electrical lines. The lecations chaum on the mist	
Select one of the following:	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.	
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	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 T-1, or Form 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 wner(s). To mitigate the additional cost of the KCC performing this	
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AUG 2 5 2010