AUG 2 7 2010

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION **KCC WICHITA** 

Form T-1 March 2010 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: MUST be submi	itted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: August 1,2010			
Gas Lease: No. of Gas Wells ONE	KS Dept of Revenue Lease No.: 1006094251 231524			
Gas Gathering System:	Lease Name: Iron Mountain #1-16			
Saltwater Disposal Well - Permit No.:				
Spot Location: 1320' feet from N / ✓ S Line	CSE _Sec16 _Twp30 _ R17 E			
1320' feet from ✓ E / W Line	Legal Description of Lease: All of Sec. 16, T39S-R17W			
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County: Kiowa			
Number of Injection Wells**	Production Zone(s): MISSISSIPPIAN			
Field Name: GLICK FIELD	Injection Zone(s):			
** Side Two Must Be Completed.				
Surface Pit Permit 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			
Past Operator's License No33936 /	Contact Person: CHARLES N. GRIFFIN			
Past Operator's Name & Address: CHARLES N. GRIFFIN	Phone: 720-490-5648			
P.O BOX 347, Pratt, Ks. 67124	Bate: 8/20/2010			
Title: Agent				
Title.	Signature.			
New Operator's License No. 31021 √	Contact Person:THOMAS P. CASTELLI			
New Operator's Name & Address: Castelli Exploration, Inc.	Phone: 405-722-5511			
6908 W 112TH OKLAHOMA CITY OK 73162				
	Oil / Gas Purchaser: Oneok			
	Date: 8/24/10			
Title: PRESIDENT	Signature: \\ Lum \\ Carles			
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 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	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:				
retiral No	permitted by No.:			
	Date:			
Date:	Authorized Signature			
DISTRICT EPR _///7//0	PRODUCTION 11-30-10 UIC 11-17-10			
Mail to: Past Operator New Operat				

#### Side Two

#### Must Be Filed For All Wells

•	23/624
KDOR Lease No	1006064251

* Lease Name:	Iron Mountain #1-16		Location:	C,SE, Sec.16, T30S-R1	7W
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)
#1-16	15-097-20439	1320' ESLIPNL	1320' Circle	GAS	PRODUCING
		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		
		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		
		FSL/FNL	FEL/FWL		

#### A separate sheet may be attached if necessary

FSL/FNL

FSL/FNL

FSL/FNL

\_\_\_\_FSL/FNL

\_\_\_\_FSL/FNL

RECEIVED

FEL/FWL

\_\_\_\_FEL/FWL

\_\_\_\_FEL/FWL

\_\_\_\_FEL/FWL

\_\_\_\_FEL/FWL

AUG 2 7 2010

KCC WICHITA

<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.

### 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.

Select the corresponding form being filed: C-1 (Intent) CB-1 (	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License # 33936	Wall Looking.			
OPERATOR: License #	Well Location:CSE_Sec. 16			
Name: CHARLES N. GRIFFIN Address 1: P.O BOX 347				
Address 2	Lease Name: IRON MOUNTAIN Wall #. 1-16			
City: PRATT State: KS Zip: 67124 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of			
Contact Person: CHARLES GRIFFIN	the lease below:			
City: PRATT State: KS Zip: 67124 + Contact Person: CHARLES GRIFFIN  Phone: ( 720 ) 490-5648 Fax: ( 620 ) 239-4012				
Email Address:				
Surface Owner Information: Name: RICHARD W. ROBBINS, JR Address 1: 5562 KIOWA COUNTY AVE. 57	When filing a Form T-1 involving multiple surface owners, attach an additional			
Address 1: 5562 KIOWA COUNTY AVE. 57	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.			
Address 2:  City: BELVIDERE State: KS Zip: 67028 +				
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and to batteries, pipelines, and electrical lines. The locations shown on the plat In the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
<ul> <li>CP-1 that I am filing in connection with this form; 2) if the form the form; and 3) my operator name, address, phone number, fax, at</li> <li>I have not provided this information to the surface owner(s). I at</li> </ul>	ocated: 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			
task, I acknowledge 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 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 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: 8/20/2010 Signature of Operator or Agent:	Title: AGENT			

67202

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

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