# 030111\_Scheufler.pdf

## KANSAS CORPORATION COMMISSION

Form T-1 OIL & GAS CONSERVATION DIVISION 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 of Check Applicable Boxes: MUST be submit  | with the Kansas Surface Owner Notification Act,<br>itted with this form.   |
|--|--|
| ✓ Oil Lease: No. of Oil Wells 1 **   | Effective Date of Transfer: 03-01-2011   |
| Gas Lease: No. of Gas Wells **   | . 1  |
| Gas Gathering System:  | KS Dept of Revenue Lease No.: 104491   |
| Saltwater Disposal Well - Permit No.:  | Lease Name: SCHEUFLER  |
| Spot Location: feet from N / S Line  | <u>CSESESec9Twp20SR11</u> _E_/_W   |
| feet from E / W Line   | Legal Description of Lease: SE/4 Sec. 9  |
| Enhanced Recovery Project Permit No.:  |  |
| Entire Project: Yes No   | County: BARTON   |
| Number of Injection Wells**  |  |
| Field Name: CHASE-SILICA   | Production Zone(s): ARBUCKLE   |
| ** Side Two Must Be Completed.   | Injection Zone(s):   |
| Surface Pit Permit No.:  (API No. if Drill Pit, WO or Haul)  Type of Pit: Emergency Burn Settling  | feet from N / S Line of Section  feet from E / W Line of Section  Haul-Off Workover Drilling   |
| Past Operator's License No. 33699  | Contact Person: Ann Verzeletti   |
| Past Operator's Name & Address:  | Phone: 303-807-1539  |
| 9250 E. Costilla Ave. Ste.510 Englewood, CO 80112  | Phone: 303-507-1539  |
| Title: VP of Engineering   | Signature: Weylith   |
| New Operator's License No. 34110 /   | Contact Person: Matthew A. Wurtzbacher   |
| New Operator's Name & Address: Caerus Kansas LLC   | Phone: 303-565-4600  |
| 600 17th Street, Suite 1600 N  | Oil / Gas Purchaser: CRCT  |
| Denver, CO 80202   | Date: 2-23-11 MAR 0.7 201  |
| Title: President   | Signature: Matthewallunghacker KCC WICHIT  |
| Acknowledgment of Transfer: The above request for transfer of injection a  | authorization, surface pit permit # has been   |
| noted, approved and duly recorded in the records of the Kansas Corporation C Commission records only and does not convey any ownership interest in the a | Commission. This acknowledgment of transfer pertains to Kansas Corporation   |
| 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:  | permitted by No.:  |
| Date:  | Date:  |
| Authorized Signature   | Date:Authorized Signate Signat |
| DISTRICT EPR PI  | RODUCTION 4-18-11 UIC 4-13-11  |
| Mail to: Past Operator New Operator  |  |

### Must Be Filed For All Wells

104491 KDOR Lease No.: **SCHEUFLER** \* Lease Name: SE/4 Sec. 9 BARTON, Co. Well No. API No. Footage from Section Line Type of Well Well Status (YR DRLD/PRE '67) (i.e. FSL = Feet from South Line) (Oil/Gas/INJ/WSW) (PROD/TA'D/Abandoned) 15-009-14406 / 2 660 660 OIL **PROD** 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 **FSL/FNL** FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL RECEIVED FSL/FNL FEL/FWL MAR 07 2011 FSL/FNL FEL/FWL FSL/FNL FEL/FWL KCC WICHITA FSL/FNL FEL/FWL FSL/FNL FEL/FWL **FSL/FNL** FEL/FWL RECEIVED FSL/FNL FEL/FWL

A separate sheet may be attached if necessary

Wife :

\*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.

KCC WICHITA

### 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 # 33699   | Well Location;   |
|---|--|
| Name: T-N-T Engineering, Inc.  Address 1: 9250 E. Costilla Ave.  Address 2: Suite 510  City: Englewood State: Co Zip: 80112 +  Contact Person: Ann Verzeletti  Phone: (303) 708-1539 Fax: (303) 858-85  |  |
| Address 1: 9250 E. Costilla Ave.  | County: Barton  Lease Name: Scheufler Well #: 2  |
| Address 2: Suite 510  | Lease Name: Scheufler Well #: 2  |
| City: Englewood State: Co Zip: 80112  | ———— If filing a Form T-1 for multiple wells on a lease, enter the legal description of  |
| Contact Person: Ann Verzeletti  | the lease below:   |
| Phone: ( 303 ) 708-1539 Fax: ( 303 ) 858-85   | 589  |
| Email Address:  |  |
| Surface Owner Information: Name: Schlessinger, Jack   |  |
| Name: Schlessinger, Jack           Address 1: 1266 NE 120 Road           Address 2:   | 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  |
| Address 2:  | owner information can be found in the records of the register of deeds for the   |
| City: Claflin State: KS 7io. 67525  | county, and in the real estate property tax records of the county treasurer.   |
| Select one of the following:  | e roads, tank batteries, pipelines, and electrical lines. The locations shown on the plate entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  |
|   |  |
|   | ner Notice Act (House Bill 2032), I have provided the following to the surface or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this mber, fax, and email address.  |
| CP-1 that I am filing in connection with this form; 2) form; and 3) my operator name, address, phone null I have not provided this information to the surface of KCC will be required to send this information to the   | if the form being filed is a Form C.1 or Form CB.1, Form T-1, or Form  |
| CP-1 that I am filing in connection with this form; 2) form; and 3) my operator name, address, phone number of the surface of KCC will be required to send this information to the task, I acknowledge that I am being charged a \$30.0 ff choosing the second option, submit payment of the \$30.0 ff  | wher(s). I acknowledge that, because I have not provided this information, the surface owner(s). To mitigate the additional cost of the KCC performing this pool handling fee, payable to the KCC, which is enclosed with this form.   |
| CP-1 that I am filing in connection with this form; 2) form; and 3) my operator name, address, phone null I have not provided this information to the surface of KCC will be required to send this information to the task, I acknowledge that I am being charged a \$30.0  | of will be located: I) a copy of the Form C-1, Form CB-1, Form T-1, or Form if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this mber, fax, and email address.  Wher(s). I acknowledge that, because I have not provided this information, the surface owner(s). To mitigate the additional cost of the KCC performing this D0 handling fee, payable to the KCC, which is enclosed with this form.  When the form the form is a copy of the Form CP-1 will be returned.  |
| CP-1 that I am filing in connection with this form; 2) form; and 3) my operator name, address, phone number of the surface of | of will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this mber, fax, and email address.  Wher(s). I acknowledge that, because I have not provided this information, the surface owner(s). To mitigate the additional cost of the KCC performing this DO handling fee, payable to the KCC, which is enclosed with this form.  When the form the form is a copy of the Form CB-1, Form T-1, or Form T |
| CP-1 that I am filing in connection with this form; 2) form; and 3) my operator name, address, phone nui  I have not provided this information to the surface of KCC will be required to send this information to the task, I acknowledge that I am being charged a \$30.0 form and the associated Form C-1, Form CB-1, Form T-1, or hereby certify that the statements made herein are true an 03/03/11  | of Will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this mber, fax, and email address.  Wher(s). I acknowledge that, because I have not provided this information, the surface owner(s). To mitigate the additional cost of the KCC performing this D0 handling fee, payable to the KCC, which is enclosed with this form.  When the form the form is a copy of the Form CP-1 will be returned.  |

KCC WICHITA