

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

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

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act,
MUST be submitted with this form.

Check Applicable Boxes:

- ☐ Oil Lease: No. of Oil Wells _____ **
- ☒ Gas Lease: No. of Gas Wells 1 **
- ☐ Gas Gathering System: _____
- ☐ Saltwater Disposal Well - Permit No.: _____
- Spot Location: _____ feet from ☐ N / ☐ S Line
_____ feet from ☐ E / ☐ W Line
- ☐ Enhanced Recovery Project Permit No.: _____
- Entire Project: ☐ Yes ☐ No
- Number of Injection Wells _____ **

Field Name: CHEROKEE BASIN COAL AREA

**** Side Two Must Be Completed.**

Effective Date of Transfer: 10-01-2010

KS Dept of Revenue Lease No.: 227201 *st*

Lease Name: Goins, Living Trust

_____ NE SE Sec. 2 Twp. 29S R. 17E ☐ E ☐ W

Legal Description of Lease: _____

NE SE

County: Neosho

Production Zone(s): _____

Injection Zone(s): _____

Surface Pit Permit No.: 1513326579

(API No. if Drill Pit, WO or Haul)

_____ feet from ☐ N / ☐ S Line of Section

_____ feet from ☐ E / ☐ W Line of Section

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☐ Drilling *OR*

Past Operator's License No. 33344 *Exp 12/30/10*

Past Operator's Name & Address: QUEST CHEROKEE LLC */*

210 PARK AVE, STE 2750, OKLAHOMA CITY, OK 73102

Title: VP OF ENGINEERING

Contact Person: RICHARD MARLIN

Phone: 405-702-7480

Date: 11-23-2010

Signature: *Richard Marlin*

New Operator's License No. 33343 */*

New Operator's Name & Address: _____

POSTROCK MIDCONTINENT PRODUCTION LLC

210 PARK AVE, STE 2750, OKLAHOMA CITY, OK 73102

Title: VP OF ENGINEERING

Contact Person: RICHARD MARLIN

Phone: 405-702-7480

Oil / Gas Purchaser: POSTROCK MIDCONTINENT PRODUCTION LLC

Date: 11-23-2010

Signature: *Richard Marlin*

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 1513326579 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
the new operator and may continue to inject fluids as authorized by
Permit No.: _____ Recommended action: _____

Date: _____

Authorized Signature

_____ is acknowledged as
the new operator of the above named lease containing the surface pit
permitted by No.: _____

Date: _____

Authorized Signature

DISTRICT _____

EPR 5-27-11

PRODUCTION 6-1-11

UIC 5-31-11

Mail to: Past Operator _____

New Operator _____

District _____

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

RECEIVED

APR 06 2011

KCC WICHITA

100110 Goins Living Trust.pdf



KDOR	LEASE NAME	WELL NO	LOCATION	API NUMBER	FOOTAGE	TYPE OF WELL	STATUS
227201 / DR	Goins, LIV TRUST	2-2	NE SE - SEC 2/29S/17E	1513326579 /	1976 FSL 672 FEL	GAS	PRODUCING

RECEIVED
APR 06 2011
KCC WICHITA

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 (Cathodic Protection Borehole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

OPERATOR: License # 33343
Name: POSTROCK MIDCONTINENT PRODUCTION LLC
Address 1: 210 PARK AVE, STE 2750
Address 2: _____
City: OKLAHOMA CITY State: OK Zip: 73102 + _____
Contact Person: RICHARD MARLIN
Phone: (405) 600-7704 Fax: (405) 600-7718
Email Address: _____

Well Location:
_____ NE SE Sec. 2 Twp. 29S S. R. 17E ☐ East ☐ West

County: Neosho
Lease Name: Goins Living Trust Well #: 2-2

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:

NE SE

Surface Owner Information:

Name: O.H. & Alice Goins, Olin Goins Trustee
Address 1: P O Box 222
Address 2: _____
City: Thayer State: KS Zip: 66776 + _____

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 county, and in the real estate property tax records of the county treasurer.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered 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 Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing 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 fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-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: 11-23-2010 Signature of Operator or Agent: Richard Marlin Title: VP OF ENGINEERING