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,

Check Applicable Boxes: MUST be subm	nitted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 4/1/2011
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 128751
Gas Gathering System:	
Saltwater Disposal Well - Permit No.:	Ţ
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease: SW/4 18-10S-24W
Enhanced Recovery Project Permit No.:	Legal Description of Lease:
Entire Project: Yes No	County: Graham
Number of Injection Wells **	Longing/Vennes City
Field Name: High Hill West	, i
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	feet from N / S Line of Section feet from E / W Line of Section Haul-Off Workover Drilling OF
Past Operator's License No. 33198	Contact Person: Lee Greene
Past Operator's Name & Address: Greene, Lee V. dba Circle G	Phone: 307-682-7380
Petroleum	Date: 03/31/2011
Title: Owner	Signature: Zu Kum
New Operator's License No. 34515	Contact Person: Lee V. Greene
New Operator's Name & Address: 6G Twister, Inc	
PO Box 1565	Oil / Gas Purchaser: NCRA RECEIVED
Gillette, WY 82717	Date: 03/31/2011 MAY 0 2 2011
Title: President	Signature: KCC WICHITA
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	on authorization, surface pit permit # has been on 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:	
Data	Date:
Date: Authorized Signature	Authorized Signature
DISTRICT EPR _6-/5-//	PRODUCTION 6.16.11 UIC 6-16-11
Mail to: Past Operator New Oper	

Side Two

Must Be Filed For All Wells

KDOR Lease No.: 128751 * Lease Name: Ruder 'A' NE SW SW 28-10S-24W * Location: Well No. Well Status API No. Footage from Section Line Type of Well (YR DRLD/PRE '67) (i.e. FSL = Feet from South Line) (Oil/Gas/INJ/WSW) (PROD/TA'D/Abandoned) 990 FSI/FNL 4290 Oil **Producing** FELFWL 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** FEL/FWL FSL/FNL FEL/FWL FSL/FNL **FEL/FWL** FSL/FNL FEL/FWL **FEL/FWL** FSL/FNL 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

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FEL/FWL

RECEIVED

MAY 02 2011

^{*} 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

KCC WICHITA

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 (C	athodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 34515	Well Location:
Name: 6G Twister, Inc	NE SW Sec. 18 Twp. 10 S. R. 24 East West
Address 1: PO Box 1565	County: Graham
Address 2	County: Graham Lease Name: Ruder 'A' Well #:
City: Gillette State: WY Zip: 82717 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Contact Person: Lee Greene	
City: Gillette State: WY Zip: 82717 + Contact Person: Lee Greene Phone: (307) 682-7380 Fax: (307) 686-2692	
Email Address:	
Surface Owner Information: Name: Alice R. Ruder	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.
Address 1: 4 Eastgate Drive	
Address 2:	
City: Hill City State: KS Zip: 67642 +	
the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:	
I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be loc 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, an	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing filed is a Form C-1 or Form CB-1, the plat(s) required by this
I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling for the surface own.	ner(s). To mitigate the additional cost of the KCC 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	ee with this form. If the fee is not received with this form, the KSONA-1 will be returned.
I hereby certify that the statements made herein are true and correct to t	he best of my knowledge and belief.
Date: 03/31/2011 Signature of Operator or Agent: Obmis	Title: Office Mana@ECEIVED
	MAY 0 2 2011