

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 1 **
☐ Gas Lease: No. of Gas Wells _____ **
☐ Gas Gathering System: _____
☒ Saltwater Disposal Well - Permit No.: D-28,032
Spot Location: 330 feet from ☐ N / ☒ S Line
2310 feet from ☒ E / ☐ W Line
☐ Enhanced Recovery Project Permit No.: _____
Entire Project: ☐ Yes ☐ No
Number of Injection Wells _____ **

Field Name: Trove

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

Effective Date of Transfer: 4/1/2011

KS Dept of Revenue Lease No.: 121211 ✓

Lease Name: Wolf "I"

SE/4 Sec. 24 Twp. 11S R. 26 ☐ E ☒ W

Legal Description of Lease: SE/4 (160 acres)

County: Gove

Production Zone(s): Topeka

Injection Zone(s): Cedar Hills

Surface Pit Permit No.: _____
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover ☒ Drilling Dr

Past Operator's License No. 34334

Past Operator's Name & Address: Greene Enterprises, Inc.

Title: President

Contact Person: Lee Greene

Phone: 307-682-7380

Date: 03/31/2011

Signature: [Signature]

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KCC WICHITA

New Operator's License No. 34515

New Operator's Name & Address: 6G Twister, Inc

PO Box 1565

Gillette, WY 82717

Title: President

Contact Person: Lee V. Greene

Phone: 307-682-7380

Oil / Gas Purchaser: NCRA

Date: 03/31/2011

Signature: [Signature]

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KCC WICHITA

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.

6G Twister Inc is acknowledged as
the new operator and may continue to inject fluids as authorized by
Permit No.: D-28,032 . Recommended action: _____
Violation u3c due for 2010
Date: 7-7-11 Cheryl L. Boyer
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 7-6-11 PRODUCTION 7-13-11 UIC 7-7-11
Mail to: Past Operator 7-7-11 New Operator 7-7-11 District 7 7-7-11

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

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* Location: SE/4 Sec 24-T11S-R26W

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* 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
**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 # 34515
Name: 6G Twister, Inc
Address 1: PO Box 1565
Address 2: _____
City: Gillette State: WY Zip: 82717 + _____
Contact Person: Lee Greene
Phone: (307) 682-7380 Fax: (307) 686-2692
Email Address: _____

Well Location:
SE - - - - - Sec. 24 Twp. 11 S. R. 26 ☐ East ☒ West
County: Gove
Lease Name: Wolf 'I' Well #: 1 & 2

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

SE/4 (160 acres) Sec 24 T11S R26W

Surface Owner Information:

Name: H & W Land Partnership
Address 1: c/o Sylvia Wolf
Address 2: 802 Hillside Drive
City: Quinter State: KS Zip: 67752 + _____

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.

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If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owner(s) 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.

KCC WICHITA

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: 03/31/2011 Signature of Operator or Agent: [Signature] Title: Office Manager

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MAY 02 2011