041911\_Biegert\_2\_30.pdf

COMPANY.

#### 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:	1
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 216986
Gas Gathering System:	Lease Name: BIEGERT 2-30
Saltwater Disposal Well - Permit No.:	
Spot Location: 4030 feet from ✓ N / S Line	Name of the second second
4030 feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	Nw/4
Entire Project: Yes No	County: FINNEY
Number of Injection Wells**	Production Zone(s): CHASE GROUP
Field Name: HUGOTON GAS AREA	!
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:(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. 34408 $\sqrt{\gamma}$	Contact Person: Randall K. Click
Past Operator's Name & Address: Cisco Operating, LLC	Phone: 214-291-9987
6900 N. Dallas Parkway, Ste 740, Plano, TX 75024	04/21/2011)
	Date:
Title: President	Signature: DECEMPED
	RECFIVED
New Operator's License No. 34545	Contact Person: Edward L. Markwell III JUN 2 9 2011
New Operator's Name & Address: ELM III Operating Company, LLC	Phone: 405-232-0418
PO Box 2446, Oklahoma City, OK 73101	Oil / Gas Purchaser: KCC WICHITA
A STATE OF THE STA	
	Date: Sel Mark 000 St
Title: President	Signature: ////////////////////////////////////
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has beer
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.
	la palianuladand or
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 pi
Permit No.: Recommended action:	permitted by No.:
Date:	Date:Authorized Signature
¥	
DISTRICT EPR /0-5-//	PRODUCTION 10.07.11 UIC 10-6-11 tor District
Mail to: Past Operator New Opera	tor District

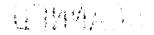
Side Two

#### Must Be Filed For All Wells

* Lease Name:	BIEGERT	* Location: NW/4 30-T22S-R34W			
Weil 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)
2-30	15055208750000	4030 FSUFNI	4030 Circle	GAS	TA
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		liker (Philippin )
		FSL/FNL	FEL/FWL		
	and and an advantage of the second of the se	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
				4444	
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	A STATE OF THE STA	FSL/FNL	FEL/FWL		
	40-2-40-1-40-1-40-1-40-1-40-1-40-1-40-1-	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		JUN 2 9 2011
		FSL/FNL	FEL/FWL	<del></del>	KCC WICHITA

A separate sheet may be attached if necessary

<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 (Intent)	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 34408	Well Location:
Name: Cisco Operating, LLC	NW Sec. 30 Twp. 22 S. R. 34 East X West
Name: Cisco Operating, LLC  Address 1: 6900 N. Dallas Pkwy, Ste 740	County: FINNEY
Address 2.	County: FINNEY  Lease Name: BIEGERT Well #: 2-30
City: Plano State: TX Zip: 75024	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person: Randall K. Click	the lease below:
Phone: ( 214 ) 291-9987 Fax: ( 214 ) 291-9985	
City: Plano State: TX Zip: 75024 + Contact Person: Randall K. Click  Phone: ( 214 ) 291-9987 Fax: ( 214 ) 291-9985  Email Address: rclick@ciscoenergyllc.com	
Surface Owner Information:  Name: DONALD ESKELUND  Address 1: PO BOX 218  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 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.
are preliminary non-binding estimates. The locations may be entered or Select one of the following:	k batteries, pipelines, and electrical lines. The locations shown on the plat n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the subject well is or will be let CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a	Act (House Bill 2032), I have provided the following to the surface 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 and email address.
	wner(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-	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	
Date: 04/21/2011 Signature of Operator or Agent:	Title: President RECEIVED
	JUN 2 9 2011

KCC WICHITA