# 041911\_Guttridge\_E\_4.pd

## 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: MUST be subm	itted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 03/01/2941 4-19-11
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 221554
Gas Gathering System:	Lease Name: GUTTRIDGE F-4 (ETZOLD SOUTH 5-3)
Saltwater Disposal Well - Permit No.:	
Spot Location: 3300 feet from ✓ N / S Line	C SE NW_Sec27  Twp33  R34
	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	NW/4
Entire Project: Yes No	County: SEWARD
Number of Injection Wells**	Production Zone(s): LOWER MORROW
Field Name: SHUCK	
** 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 Ø €
Past Operator's License No. 34408 \(  \)	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: And I I I
Title: President	Signature: U WWW MM DWW
	RECEIVED
New Operator's License No. 34545 /	Contact Person: Edward L. Markwell III
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
	Date:
Title: President	Signature: The level to
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.
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	Authorized Signature
DISTRICT EPR 10-4-11	PRODUCTION 10.06.11 UIC 10-5-11
Mail to: Past Operator New Operator	tor District

#### Side Two

#### Must Be Filed For All Wells

HIMMAC &

KCC WICHITA

12

KDOR Lease No.: \_ 221554 Guttridge \* Lease Name: NW/4 Section 27-T33S-R34W, Shuck API No. (YR DRLD/PRE '67) Well No. Footage from Section Line Type of Well Well Status (i.e. FSL = Feet from South Line) (Oil/Gas/INJ/WSW) (PROD/TA'D/Abandoned) Circle F-4 151752094900<del>00</del> 3300 3300 oil TA ED/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

A separate sheet may be attached if necessary

FEL/FWL

FSL/FNL

<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

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	cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 34408	Well Location:
Name: Cisco Operating, LLC	CSE_NW_Sec. 27_Twp. 33_S. R. 34 East 🗷 West
Address 1: 6900 N. Dallas Pkwy, Ste 740	SEWARD
Address 2:	Lease Name: GUTTRIDGE (ETZOLD SOUTH) Well #: F-4 (5-3)
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:
Contact Person: Randall K. Click  Phone: ( 214 ) 291-9987	
Email Address: rclick@ciscoenergyllc.com	
Surface Owner Information:  Name: RHETT YODER  Address 1: 11671 ROAD D  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.
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathod 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:	batteries, pipelines, and electrical lines. The locations shown on the plat
✓ I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be lo CP-1 that I am filing in connection with this form; 2) if the form b 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 ac KCC will be required to send this information to the surface own task, I acknowledge that I am being charged a \$30.00 handling	ner(s). To mitigate the additional cost of the KCC performing this
If choosing the second option, submit payment of the \$30.00 handling to form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	fee 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	the best of my knowledge and belief. RECEIVED
A	
Date: 04/21/2011 Signature of Operator or Agent:	Title: President JUN 2 9 2011