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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 Effective Date of Transfer: _ Gas Lease: No. of Gas Wells _ 1 KS Dept of Revenue Lease No.: 220555 Gas Gathering System: Lease Name: KOCH A-1 Saltwater Disposal Well - Permit No.: _ _ <u>sw _ sw _sec. _15 _Twp. _33 _R. _34 ___</u> E / w ____ feet from N / X S Line Spot Location: ___ feet from ☐ E / 🌠 W Line Enhanced Recovery Project Permit No.: County: SEWARD Entire Project: Yes No Number of Injection Wells. Production Zone(s): UPPER CHESTER 2 Field Name: SHUCK Injection Zone(s): ** Side Two Must Be Completed. feet from N / S Line of Section Surface Pit Permit No.: _ (API No. if Drill Pit, WO or Haul) E / W Line of Section Haul-Off Settling Workover Drilling Type of Pit: Emergency Burn 34408 Randall K. Click Past Operator's License No. Contact Person: _ Past Operator's Name & Address: Cisco Operating, LLC Phone: 214-291-9987 6900 N. Dallas Parkway, Ste 740, Plano, TX 75024 Date: President Contact Person: Edward L. Markwell III New Operator's License No. -New Operator's Name & Address: ELM III Operating Company, LLC Phone: 405-232-0418 PO Box 2446, Oklahoma City, OK 73101 Oil / Gas Purchaser President has been Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # 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 of the above named lease containing the surface pit the new operator and may continue to inject fluids as authorized by Permit No.: permitted by No.: _ RECEIVED Date: Authorized Signa Authorized Signature 10/13/2011 DISTRICT ... PRODUCTION. District New Operator Mail to: Past Operator _

Must Be Filed For All Wells

Lease Name:	NOOH A-1		* Location:	section 15-T33S-R34W,	, JEMAND, SHOOK
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet from		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
A-1	15-175-20300-000 1517520550000	Circle 660 SDFNL	660 Circle	GAS	TA'D
		FSL/FNL	FEL/FWL		
	-	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		AMAZONI
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
<u>.</u>		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		
					NECEIVEL
					MAI 10 ZU
		FSL/FNL	FEL/FWL		KCC WICHI

A separate sheet may be attached if necessary

^{*} 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.

ODEDATOD. Liconco # 07700			
Cisco Operating LLC	Well Location:		
OPERATOR: License # 34408 Name: Cisco Operating, LLC Address 1: 6900 N. Dallas Pkwy, Ste 740	SEWARD		
Address 1:	County: SEWARD Lease Name: KOCH Well #: A-1		
Address 2: TX -: 75024	Lease Name: Well #:		
City: State: Zip:+	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Address 2:			
Phone: () Fax: (
Email Address:			
Surface Owner Information:			
Name: HITCH LAND & CATTLE CO Address 1: BOX 76	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:			
Address 2:	county, and in the roal counterproperty and road ac or the county accounts.		
City: State: zip:+			
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 owner(s) of the land upon which the subject well is or will be 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,	Act (House Bill 2032), I have provided the following to the surface located: 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.		
Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be 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, I have not provided this information to the surface owner(s). I	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form a being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this		
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Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be 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, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling 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 CB-1.	Act (House Bill 2032), I have provided the following to the surface located: 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. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ag fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1 or will be returned.		