100110 Monroe 4.pdf

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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,

Form T-1
March 2010
Form must be Typed
Form must be Signed
All blanks most be Filled

Check Applicable Boxes: MUST be submi	itted with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 10-01-2010		
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: _215629		
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:	Lease Name: MONROE #4		
Spot Location: 4950 feet from 🗸 N / 🗌 S Line			
feet from ✓ E / ☐ W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	NE NE NE		
Entire Project: Yes No	County: CHAUTAUQUA		
Number of Injection Wells **	Production Zone(s): CHEROKEE COALS		
Field Name: HALE-INGE	Production Zone(s):		
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.: 1501925820			
(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section		
Time at Bits	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling		
Past Operator's License No. 33344 Exp. 12/30/10	Contact Person: Stephen L. DeGiusti, Secretary and Treasurer		
Past Operator's Name & Address: QUEST CHEROKEE, LLC	Phone: 405-702-7420		
210 PARK AVE, STE 2750 OKLAHOMA CITY OK 73102	Date: 08/10/2011		
	Date:		
Title: By PostRock Energy Services Corporation, acle member of PostRock MidContinent Production, LLC, auccessor by merger	Signature: Signature:		
New Operator's License No. 33343 /	Contact Person: Stephen L. DeGiusti, Secretary and Treasurer		
New Operator's Name & Address: PostRock MidContinent Production, LLC	Phone: 405-702-7420		
210 Park Avenue, Suite 2750	Oil / Gas Purchaser: PostRock MidContinent Production, LECENTER		
Oklahoma City, OK 73102	Date: 08/10/2011		
Title: By PostRock Energy Services Corporation, its sole member	Signature: Steel L. Stringt AUG 1 7 201		
	KCC MION IN		
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # 1501925820 has been		
	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the a	•		
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:	i i		
. Hocomination action,	permitted by No.:		
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR 10/25/11 F	PRODUCTION 10 · 27 · 11 uic 10-24-LL		
Mail to: Past Operator New Operato			

Side Two

Must Be Filed For All Wells

KDOR Lease No.: 215629						
* Lease Name:			Location;	NE NE NE SEC 28-328	-12E	
Well No.	Well No. API No. Footage from Section (YR DRLD/PRE 67) (i.e. FSL = Feet from South		Section Line om South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
1	1501925820	4950 Sircle	165 Circle	GAS	ACTIVE	
		FSL/FNL	FEL/FWL			
	· ·	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL			
		FSUFNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
						
		FSL/FNL				
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
					RECEIVED	

					VCC ANICHITY	
						
						
					<u></u>	
		FSL/FNL	FEL/FWL			

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.

Select the corresponding form being filed: C-1 (Intent) CB-1 (C	Cathodic Protection Borehole Intent)		
OPERATOR: License # 33343 Name: POSTROCK MIDCONTINENT PRODUCTION LCC Address 1: 210 PARK AVENUE STE 2750 Address 2: City: OKLAHOMA CITY State: OK Zip: 73102 + Contact Person: STEPHEN L. DeGIUSTI Phone: (405) 702-7420 Fax: (405) 815-4315 Email Address:	Well Location: NENESec 26Twp 32S_S. R12X East West County: CHAUTAUQUA Lease Name: MONROE Well #: 4 If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Surface Owner Information: Name: DAVID L MONROE Address 1: 2697 RANCH ROAD 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 loce CP-1 that I am filing in connection with this form; 2) if the form beform; 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 f	per(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	se 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 Date: 8/10/11 Signature of Operator or Agent:	the best of my knowledge and belief. L. Juiki Title: Secretary and Treasurer		

RECEIVED

AUG 1 7 2011

KCC WICHITA