## 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,

Check Applicable Boxes:	IST be submitted with this form.
Oil Lease: No. of Oil Wells	Effective Date of Transfer:10-01-2010
X Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 225510
Gas Gathering System:	
Saltwater Disposal Well - Permit No.:	Lease Name: Shouse
Spot Location: feet from N / S	Line NE NE NE Sec. 14 Twp. 30S R. 12E E
	/ Line Legal Description of Lease:
Enhanced Recovery Project Permit No.:	NE NE NE, SW NG SENE
Entire Project: Yes No	County: Elk
Number of Injection Wells **	
Field Name: LONGTON NORTH	Production Zone(s): UNKNOWN
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.: 1504922070	
(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section
7	feet from E / W Line of Section
Type of Pit: Emergency Burn Settlin	ng Haul-Off Workover Drilling OR
Past Operator's License No. 33344 Exp /2/30/10	Contact Person:RICHARD MARLIN
Past Operator's Name & Address: QUEST CHEROKEE LLC	Phone: 405-702-7480
210 PARK AVE, STE 2750, OKLAHOMA CITY, OK 73102	
	Date: 11-23-2010
Title: VP OF ENGINEERING	Signature: Kickard Warlen
New Operator's License No. 33343 V	Contact Person: RICHARD MARLIN
New Operator's Name & Address:	Phone: 405-702-7480
POSTROCK MIDCONTINENT PRODUCTION ILLC	Oil / Gas Purchaser; POSTROCK MIDCONTINENT PRODUCTION LLC
210 PARK AVE, STE 2750, OKLAHOMA CITY, OK 73102	Date: 11-23-2010
Title: VP OF ENGINEERING	
100:	Signature: Sichard Warlin
Acknowledgment of Transfer: The above request for transfer	
	Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership into	erest in the above injection well(s) or pit permit.
is acknowle	edged as is acknowledged as
the new operator and may continue to inject fluids as autho	rized by the new operator of the above named lease containing the surface pit
Permit No.: Recommended action:	•
	pormitted by No.
Date:	Date:
Authorized Signature	Authorized Signature
DISTRICT EPR	// PRODUCTION 10.04.11 UIC 10-4-(1
Mail to: Past Operator	New Operator District

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

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KDOR	LEASE NAME	WELL NO	LOCATION	API NUMBER	FOOTAGE	TYPE OF WELL	STATUS
225510	<b>F</b> Shouse	14-1	NE NE NE - SEC 14/30S/12E	1504922070 🖊	4950 FNL 330 FWL	GAS	TA
		14-2	SW NE SE NE - SEC 14/30S/12E	1504922069 🗸	3447 FNL 380 FWL	GAS	TA
				SE/con	ner		

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KCC WICHITA

## 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.

grand. Gormany Gor	(Cathodic Protection Borehole Intent)   T-1 (Transfer)   CP-1 (Plugging Application)			
OPERATOR: License # 33343	Well Location:  SW NE NE NE Sec. 14 Twp. 30S S. R. 12E East West			
Name: POSTROCK MIDCONTINENT PRODUCTION LLC				
Address 1: 210 PARK AVE, STE 2750	Sec. 14 Twp. 305 S. R. 12E East West			
Address 2	Oodrky.			
City: OKLAHOMA CITY State: OK 7: 73102	Lease Name: Shouse Well #:			
Address 2:	If filing a Form T-1 for multiple wells on a lease, enter the legal description o the lease below:			
Phone: ( 405 ) 600-7704 Fav: ( 405 ) 600-7718	NE NE NE , SW NE SE NE			
Email Address:	, •			
Surface Owner Information:				
Name: Shouse Bar S Ranch LLC	When filing a Form T-1 involving multiple surface owners, attach an additional			
Address 1:	sneet listing all of the information to the left for each surface owner. Surface			
Address 2:         4936 NE Shaffer Rd           City:         Topeka         State:         KS         Zip:         66617         +				
City: Topeka State: KS Zip: 66617	the state of the s			
Select one of the following:	n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
form; and 3) my operator name, address, phone number, fax, at	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 nd email address.			
KCC will be required to send this information to the surface owner(s). Faction will be required to send this information to the surface owner(s). Faction will be required to send this information to the surface owner(s). Faction will be required to send this information to the surface owner(s). Faction will be required to send this information to the surface owner(s). Faction will be required to send this information to the surface owner(s). Faction will be required to send this information to the surface owner(s).	cknowledge that, because I have not provided this information, the mer(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.			
f 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	fee with this form. If the fee is not received with this form, the KSONA-1 1 will be returned.			
hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.			
ate: 11-23-2010 Signature of Operator or Agent: Legal	Marlin Title: VP OF ENGINEERING			
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