KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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 / 2 / 3
Oil Lease: No. of Oil Wells**	Effective Date of Transfer:
Gas Lease: No. of Gas Wells 4	KS Dept of Revenue Lease No.: 231423,230512,230513,2314
Gas Gathering System:	Lease Name: Schlepp
Saltwater Disposal Well - Permit No.: Spot Location: feet from N / S Line	Legal Description of Lease: Located in Section 33, Township 3
feet from LE / W Line Enhanced Recovery Project Permit No.:	South, Range 42 West Enfire KCC WICHITA
Entire Project: Yes No	County: Cheyenne Display Table (a) Nighters JUN 2 7 2013
Number of Injection Wells***	Production Zone(s): Niobrara JUN 2 / 2013
Field Name: Cherry Creek ** Side Two Must Be Completed.	Injection Zone(s):RECEIVED
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	feet from N/S Line of Section feet from E/W Line of Section Haul-Off Workover DP Drilling
Past Operator's License No. 33325 /	Contact Person:Jeff Glossa
Past Operator's Name & Address: _ PDC Energy	Phone: 303-860-5800
1775 Sherman ST, STE 3000 Denver,CO 80202	10112112
Title: Regulatory Supervisor	Signature: RAB Free EVP+COO
New Operator's License No. 34110	Contact Person: Matthew Wurtzbacher
New Operator's Name & Address: Caerus Washco LLC	Phone: 303-565-4600
600 17th ST, STE 1600 N Denver, CO 80202	Oil / Gas Purchaser:
	Date: (0/18/13
Title: President and COO	Signature: Chiet Chiet Chiet
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation
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:	permitted by No.:
Date:	Date:
Authorized Signature /	
DISTRICT EPR 7/10/13 Mail to: Past Operator New Operator	PRODUCTION



Side Two

Must Be Filed For All Wells

KDOR Lease No.: 231423, 230512, 230513, 231424

* Lease Name:	Schlepp	*Location: Sec 33 T3S R 42W			
Well 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)
11-33	15023210350000	Circle 990 FNL FSL/FNL	Circle 330 FWL FEL/FWL	Gas	Producing
33-8-2	15023203340000	2031 FNL FSL/FNL	610 FEL FEL/FWL	Gas	Producing
33-9-3	15023203320000	2074 FSL FSL/FNL	606 FEL FEL/FWL	Gas	Producing
12-33	15023208350000	2300 FNL FSL/FNL	760 FWL FEL/FWL	Gas	Producing
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	***************************************	
		FSL/FNL	FEL/FWL	3	

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 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: 6/19/13 Effective Date of Transfer: _____ Oil Lease: No. of Oil Wells __ Gas Lease: No. of Gas Wells _4 KS Dept of Revenue Lease No.: ____ Gas Gathering System: Lease Name: Schlepp Saltwater Disposal Well - Permit No.: ___ __ Sec. 33 Twp. 3S R. 42 EV W _____feet from N/ S Line Legal Description of Lease: Located in Entire Section 33, Township 3 feet from E / W Line South, Range 42 West Enhanced Recovery Project Permit No.: _____ County: Cheyenne Entire Project: Yes No Number of Injection Wells ___ Production Zone(s): Niobrara Field Name: Cherry Creek Injection Zone(s):__ ** Side Two Must Be Completed. Surface Pit Permit No.: _ __ feet from N / S Line of Section (API No. if Drill Pit, WO or Haul) feet from E / W Line of Section Drilling Settling Haul-Off Workover Type of Pit: Emergency Burn Contact Person: __Jeff Glossa Past Operator's License No. 33325 Past Operator's Name & Address: _PDC Energy Phone: 303-860-5800 KCC WICHITA 1775 Sherman ST, STE 3000 Denver, CO 80202 Title: Regulatory Supervisor JUL 0 5 2013 Signature: _ RECEIVED Contact Person: Matthew Wurtzbacher New Operator's License No. -New Operator's Name & Address: Caerus Washco LLC Phone: 303-565-4600 600 17th ST, STE 1600 N Denver, CO 80202 Oil / Gas Purchaser: Title: President and COO Signature: ___ 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 the new operator and may continue to inject fluids as authorized by the new operator of the above named lease containing the surface pit _____. Recommended action: permitted by No.: ___ Date:_ Authorized Signature Authorized Signature DISTRICT _____ PRODUCTION _ UIC Mail to: Past Operator ____ ____ New Operator_

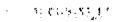
Side Two

Must Be Filed For All Wells

KDOR Lease	No.:					
* Lease Name: Schlepp			* Location: Entire Sec 33 T3S R 42W			
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)	
11-33	15023210350000	990 FNL FSL/FNL	Circle 330 FWL FEL/FWL	Gas	Producing	
33-8-2	15023203340000	2031 FNL FSL/FNL	610 FEL FEL/FWL	Gas	Producing	
33-9-3	15023203320000	2074 FSL FSL/FNL	606 FEL FEL/FWL	Gas	Producing	
12-33	15023208350000	2300 FNL FSL/FNL	760 FWL FEL/FWL	Gas	Producing	
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL		<u> </u>	

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.



Side Two

Must Be Filed For All Wells

Lease Name:	Schlepp		* Location: E	intire Sec 33 T3S R 42V	N
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)
11-33	15023210350000	Circle 990 FNL FSL/FNL	Circle 330 FWL FEL/FWL	Gas	Producing
33-8-2	15023203340000	2031 FNL FSL/FNL	610 FEL FEL/FWL	Gas	Producing
33-9-3	15023203320000	2074 FSL FSL/FNL	606 FEL FEL/FWL	Gas	Producing
12-33	15023208350000	2300 FNL FSL/FNL	760 FWL FEL/FWL	Gas	Producing
		FSL/FNL	FEL/FWL		
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		T GUTINL	FEL/FVVL		

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

RECEIVED

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).

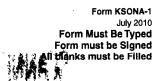
Any such form submitted without an accompanying Form KSONA-1 will be returned.

OPERATOR: License # 34110	Well Location:			
Name: Caerus Washco LLC				
Address 1: 600 17th St. Suite 1600 N				
Address 2	Lease Name. Schlepp Well #			
Contact Person: Matthew Wurtzbacher Phone: (303) 565-4600 Fax: (303) 565-4606	If filing a Form T-1 for multiple wells on a lease, enter the legal description o the lease below:			
Contact Person: Matthew Wurtzbacher	Located in Entire Section 33, Township 3S R			
Email Address:	- 42W -			
Surface Owner Information:				
Name: Spencer J. Schlepp Address 1: HC 1 Box 42	When filing a Form T-1 involving multiple surface owners, attach an additional			
Address 1: HC 1 Box 42	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			
Address 2:	county, and in the real estate property tax records of the county treasurer.			
Address 2:	_			
the KCC with a plat showing the predicted locations of lease roads, t	thodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
the KCC with a plat showing the predicted locations of lease roads, t are preliminary non-binding estimates. The locations may be entere Select one of the following:	tank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
the KCC with a plat showing the predicted locations of lease roads, to are preliminary non-binding estimates. The locations may be entered select one of the following: I certify that, pursuant to the Kansas Surface Owner Notic owner(s) of the land upon which the subject well is or will be	tank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. e Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this			
the KCC with a plat showing the predicted locations of lease roads, the preliminary non-binding estimates. The locations may be entered 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 forform; and 3) my operator name, address, phone number, factoric I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface	tank batteries, pipelines, and electrical lines. The locations shown on the plat d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. e Act (House Bill 2032), I have provided the following to the surface be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this			
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

Kansas Corporation Commission Oil & Gas Conservation Division

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	(Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)				
OPERATOR: License # 34110 Name: Caerus Washco LLC Address 1: 600 17th St. Suite 1600 N					
Address 1: 600 17th St. Suite 1600 N	County: Cheyenne Lease Name: Schlepp Well #:				
Address 2:	Lease Name: Scniepp Well #:				
City: Denver State: CO Zip: 80202 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: Entire Sec 33 T3S R 42W				
Contact Person: Matthew Wurtzbacher					
Contact Person: Matthew Wurtzbacher Phone: (303) 565-4600 Fax: (303) 565-4606					
Email Address:					
Surface Owner Information:					
Name: Spencer J. Schlepp Address 1: HC 1 Box 42	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				
Address 1: HC 1 BOX 42	owner information can be found in the records of the register of deeds for the				
Address 2:	county, and in the real estate property tax records of the county treasurer.				
City: St. Francis State: KS Zip: 67756 +					
are preliminary non-binding estimates. The locations may be entered Select one of the following:	ank batteries, pipelines, and electrical lines. The locations shown on the plat I on 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	Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this , and email address.				
I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 handling	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ng fee, payable to the KCC, which is enclosed with this form.				
If choosing the second option, submit payment of the \$30.00 handlir form and the associated Form C-1, Form CB-1, Form T-1, or Form Ca	ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.				
I hereby certify that the statements made herein are true and correct	to the best of my knowledge and belief.				
Date: 4/24/13 Signature of Operator or Agent:	Title: CEO & Trasure				
	KCC WICHITA				

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

RECEIVED

JUN 27 2013