### 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: MUST be submitted	ted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: (1.20.13
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.:
Gas Gathering System:	Lease Name: MAYBERRY B-1
Saltwater Disposal Well - Permit No.:	
Spot Location: 1500 feet from [] N / S Line	<u>N2 _ SE Sec. 12 Twp. 33 R. 38</u> E  W
1320 feet from E / [ ] W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	SE/4 of 12-33-38W
Entire Project: Yes No	County: STEVENS
Number of Injection Wells**	Production Zone(s): LOWER MORROW
Field Name: GENTZLER	
** 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 OR Drilling
Past Operator's License No. 34408 Exp. 6/30/63	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	$\sqrt{2}$
	Date:
Title: President	Signature: William I Oliman
New Operator's License No. 34929V	Contact Person: 12An ITaun+2
New Operator's Name & Address: Wynn-Crosby Operating, Ltd.	Phone: 972-354-1367 KCC WICHITA
14241 Dallas Parkway, Ste 800, Dallas, TX 75254	
	Oil / Gas Purchaser:
	Date.
Title V.P. Land	Signature: RECEIVED
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been
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 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 pit
Permit No.: Recommended action:	permitted by No.:
Date	Date:
Date:	Authorized Signature
DISTRICT EPR	PRODUCTION 7.30.13 UIC 7-21-13
Mail to: Past Operator New Operator	or District

#### Must Be Filed For All Wells

	$\checkmark$	
KDOR Lease No.:	132758 / 219792	

* Lease Name:	Mayberry B-1	* Location: Sec. 12-T33S-R38W			
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)
1	15-189-21622-00-01	1500 FSL)FNL	1320 FEL FWL	Gas	Prod
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		<del></del>
		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		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	-	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		KCC WICHITA
		FSL/FNL	FEL/FWL		JUL 16 2013
		FSL/FNL	FEL/FWL		
		ESI /ENI	FFI /FWI		RECEIVED

A separate sheet may be attached if necessary

<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

**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.

Select the corresponding form being filed:	1 (Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 34408	Mall Location		
Cisco Operating LLC	Well Location:N2 _SE Sec. 12 Twp. 33 S. R. 38 ☐ East ■ West		
Address 1: 6900 N. Dallas Pkwy, Ste 740	County: STEVENS		
Address 2:	Lease Name: MAYBERRY Well #: B-1		
City: Plano State: TX zip: 75024 +			
Contact Person: Randall K. Click	<ul> <li>If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:</li> </ul>		
Phone: ( 214 ) 291-9987 Fax: ( 214 ) 291-9985	•		
Contact Person: Randall K. Click  Phone: ( 214 ) 291-9987 Fax: ( 214 ) 291-9985  Email Address: rclick@ciscoenergyllc.com	- -		
Surface Owner Information:           Name:         RICHARD D. & VICKIE S. HALL           Address 1:         998 ROAD P           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.		
	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 clocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form n being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.		
KCC will be required to send this information to the surface of	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 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form Cl	ng fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.		
$\bigcap$	- A A		
I hereby certify that the statements made herein are true and correct	to the best of myknowledge and belief.		
Date: <u>6-20-13</u> Signature of Operator or Agent	Title: President KCC WICHITA		
•	<b>G</b>		
	JUL 1 6 2013		