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 with this form. Oil Lease: No. of Oil Wells Effective Date of Transfer: _ Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 224763 Gas Gathering System: Lease Name: IDA KEITH Saltwater Disposal Well - Permit No.: _ Spot Location: 3300 _ <u>SE _ SE _ NE Sec. 3 Twp. 35S</u> R. <u>17E</u> ✓ E W feet from V N / S Line feet from ☐ E / ✓ W Line N/2 3-35S-17E Legal Description of Lease: _ Enhanced Recovery Project Permit No.: Entire Project: Yes No County: MONTGOMERY KCC WICHITA Number of Injection Wells Production Zone(s): Field Name: IIIL 15 2013 Injection Zone(s): ** Side Two Must Be Completed. RECEIVED 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 Type of Pit: Emergency Burn Settling Haul-Off Workover Drilling Past Operator's License No. _33344 Exp Stephen L. DeGiusti Contact Person: QUEST CHEROKEE, LLC Past Operator's Name & Address: 405-702-7420 210 PARK AVE, STE 2750 OKLAHOMA CITY OK 73102 Title: By PostRock MidContinent Production, LLC, successor by merger, Signature: By PostRock Energy Services Corporation, its sole member, By Stephen L. DeGiusti, Secretary and Treasurer New Operator's License No. Contact Person: Stephen L. DeGiusti New Operator's Name & Address: Phone: 405-702-7420 POSTROCK MIDCONTINENT PRODUCTION, LLC Oil / Gas Purchaser: POSTROCK MIDCONTINENT PRODUCTION LLC 210 PARK AVENUE, STE 2750 OKLAHOMA CITY, OK 73102 By PostRock Energy Services Corporation, its sole member, By Stephen L. DeGiusti, Secretary and Treasurer 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. 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 max continue the new operator of the above named lease containing the surface pit permitted by No.: Date: Authorized Signature DISTRICT . Mail to: Past Operator **New Operator** District

N

Must Be Filed For All Wells

KDOR Lease No.: 224763

* Lease Name:	IDA KEITH	* Location:3-35S-17E			
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet from Please use the	om South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15-125-26966 🗸	324 Circle	355 Circle	GAS	ABANDONED
2	15-125-26967	995_FSL(FND)	320 ED/FWL	GAS	ABANDONED
3	15-125-27037V	345 FSLEND	1023 (EI)/FWL	GAS	ABANDONED
4 was 1	15-125-22310	2032 FSLEND	2259 EDFWL		ABANDONED
6	15-125-30317 🗸	1518 FSLÆN	1849 (F)/FWL		ABANDONED
2 SWD	15-125-22311-0001	_	592 EDFWL		
MANUAL TO THE PARTY OF THE PART		FSL/FNL			on 2-24-11
			FEL/FWL		
			FEL/FWL		
-			FEL/FWL		
-			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 1 5 2013
		FSL/FNL _	FEL/FWL _		RECEIVED

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.

OPERATOR: License # 33343			
OPERATOR: License # 33343 Name: POSTROCK MIDCONTINENT PRODUCTION, LLC	. Well Location:		
Address 1: 210 PARK AVENUE STE 2750	Sec. 3 Twp. 35S S. R. 17E X East West		
Address 2:	Local Name IDA KEITH		
City: OKLAHOMA CITY State: OK 7ip: 73102	Well #:		
Contact Person: STEPHEN L. DeGIUSTI	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: N/2, 3-35S-17E		
City: OKLAHOMA CITY State: OK Zip: 73102			
Email Address:			
Surface Owner Information:			
Name: RICK BRADLEY	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: 1691 DR 5700 Address 2:	sneet listing all of the information to the left for each surface owner. Surface		
Address 2:	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.		
City: COFFEYVILLE State: KS Zip: 67337 +			
Select one of the following:	on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
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, a			
KCC will be required to send this information to the surface owner(s). I a KCC will be required to send this information to the surface owner(s). I acknowledge that I am being charged a \$30.00 handling	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this gree, payable to the KCC, which is enclosed with this form.		
f choosing the second option, submit payment of the \$30.00 handling orm and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.		
hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.		
rate: July 10, 2013 Signature of Operator or Agent: Styl	Loff Title: Secretary and Treasurer		

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

RECEIVED

JUL 15 2013