KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 1-1 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: Oil Lease: No. of Oil Wells _ 6.20.13 Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: ___ Gas Gathering System: Lease Name: Morian A-4 Saltwater Disposal Well - Permit No.: _- C __ SW _ SW Sec. 21 Twp. 33 R. 34 __ F V W Spot Location: 660 Legal Description of Lease: 5W/4 of 21-33-34W Enhanced Recovery Project Permit No.: _ Entire Project: Yes No County: Seward Number of Injection Wells _ Production Zone(s): Lower Chester Field Name: Shuck 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 Type of Pit: Emergency Burn Settling Haul-Off Workover Randall K. Click Past Operator's License No. Contact Person: Cisco Operating, LLC Past Operator's Name & Address: 6900 N. Dallas Parkway, Ste 740, Plano, TX 75024 **President** 34929V DAA New Operator's License No. _ Contact Person: . New Operator's Name & Address: Wynn-Crosby Operating, Ltd. 14241 Dallas Parkway, Ste 800, Dallas, TX 75254 Date: 6-20-13 V.P. Title: __ Signature: RECEIVED 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 _ 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.: ___ Authorized Signature DISTRICT -PRODUCTION ____ Mail to: Past Operator _ **New Operator**

W

Must Be Filed For All Wells

* Lease Name:	Morlan A-4			ec 21-T33S-R34W		
Lease Name:			* Location:	*Location: Sec. 21-T33S-R34W		
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)	
<u>A-4</u>	15-175-20420 ✓	660 (FSL)FNL	660 Circle	Gas	Prod	
		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			
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		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL _		KCC WICHITA	
		FSL/FNL	FEL/FWL		JUL 1 8 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

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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.

Name: Cisco Operating, LLC Address 1: 6900 N. Dallas Pkwy, Ste 740 Counter Plano Contact Person: Randall K. Click Phone: (214) 291-9987 Email Address: Surface Owner Information:	Location: .C _SW_SW_Sec. 21 _Twp. 33 _S. R. 34 East \ west .ty: SEWARD e Name: MORLAN		
Address 1: 6900 N. Dallas Pkwy, Ste 740 Address 2: Lease City: Plano State: TX Zip: 75024	e Name: MORLAN Well #: A-4 g a Form T-1 for multiple wells on a lease, enter the legal description of		
Address 2: Lease City: Plano State: TX Zip: 75024	ng a Form T-1 for multiple wells on a lease, enter the legal description of		
City: Plano State: TX Zip: 75024 + If filin Contact Person: Randall K. Click Phone: (214) 291-9987 Fax: (214) 291-9985 Email Address: Surface Owner Information:	ng a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: Randall K. Click Phone: (214) 291-9987 Fax: (214) 291-9985 Email Address:	ng a Form T-1 for multiple wells on a lease, enter the legal description of ease below:		
Surface Owner Information:	ease below:		
Surface Owner Information:			
Surface Owner Information:			
Surface Owner Information:			
Name: TOLS DAIRT FARMS LLC When	n filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1. RR1 BOX 166A sheet	sheet listing all of the information to the left for each surface owner. Surface		
Address 2: count	r information can be found in the records of the register of deeds for the y, and in the real estate property tax records of the county treasurer.		
City: LIBERAL State: KS Zip: 67901 +	•		
are preliminary non-binding estimates. The locations may be entered on the Fore Select one of the following:	п С-1 plat, Form СВ-1 plat, or a separate plat may be submitted.		
I certify that, pursuant to the Kansas Surface Owner Notice Act (House owner(s) of the land upon which the subject well is or will be located: 1) CP-1 that I am filing in connection with this form; 2) if the form being filed form; and 3) my operator name, address, phone number, fax, and email) a copy of the Form C-1, Form CB-1, Form T-1, or Form d is a Form C-1 or Form CB-1, the plat(s) required by this address.		
	o mitigate the additional cost of the KCC performing this		
I have not provided this information to the surface owner(s). I acknowled KCC will be required to send this information to the surface owner(s). T task, I acknowledge that I am being charged a \$30.00 handling fee, paya	able to the NCC, which is enclosed with this lottly.		
KCC will be required to send this information to the surface owner(s). T task, I acknowledge that I am being charged a \$30.00 handling fee, paya If choosing the second option, submit payment of the \$30.00 handling fee with the second option.	this form. If the fee is not received with this form, the KSONA-1		
KCC will be required to send this information to the surface owner(s). T	this form. If the fee is not received with this form, the KSONA-1 returned.		