KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1
March 2010
Form must be Typed
Form must be Signed

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: August 9, 2012 Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 223752 Gas Gathering System: Lease Name: Fink (formerly known as Mahaffey) Saltwater Disposal Well - Permit No.: Spot Location: _ feet from N / Legal Description of Lease: SE/4 of SE/4 and SW/4 of SE/4 and commencing at SW feet from E / Enhanced Recovery Project Permit No.: _ RECEIVED KANSAS CORPORATION COMMISSION Entire Project: Yes No County: _Wilson Number of Injection Wells Weiser sand Production Zone(s): Field Name: Neodesha Injection Zone(s): CONSERVATION DIVISION ** Side Two Must Be Completed. WICHITA, KS 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: Settling Emergency Burn Haul-Off Workover Contact Person: Douglas L. Shay Past Operator's License No. Past Operator's Name & Address: _ Dakota Production Co., Inc. Phone: 972-572-5069 P.O. Box 350, Neodesha, KS 66757 September 16, 2013 President Signature: Pamela Graves New Operator's License No. Contact Person: New Operator's Name & Address: CherokeeNRG LLC Phone: 620-432-1840 101 W. Illinois, Vinita, OK 74301 Oil / Gas Purchaser: Seminole Energy Services Date: September 16, 2013 Authorized Agent 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 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 . Mail to: Past Operator _ New Operator District

Must Be Filed For All Wells

KDOR Lease No.: 223752						
* Lease Name:	Fink (formerly known as	Mahaffey)	* Location:	*Location: GPS location on all wells, T30S R17E, Sec. 19		
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)	
19-2	1520527774	878 Circle	959 Circle FEI/FWL	GAS	PRODUCING	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL				
		FSL/FNL				
			FEL/FWL			
***************************************		FSL/FNL				
		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		RECEIVED	
		FSL/F N L	FEL/FWL	KAN	SAS CORPORATION COMMISSION	
		FSL/FNL	FEL/FWL		OCT 2 3 2013	
		ESI /ENI	FEL/FIA/L		CONSERVATION DIVISION WICHITA, KS	

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.

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 # 34769	Well Location:		
Name: CherokeeNRG LLC			
Address 1: 101 W. Illinois			
Address 2:	Lease Name: Fink (fka Mahaffey) Well #: 19-2		
City: Vinita State: OK Zip: 74301 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: SE/4 of SE/4 and SW/4 of SE/4 and commencing at SW corner of SE/4 to West line of last qtr sec. crosses Dry creek, thence south to point of beg in Sec.19 T30S R17E; and NW/4 of NE/4 of Sec.30		
Contact Person: Pamela Graves			
Phone: (620) 432-1840 Fax: ()			
Email Address: pgraves05@yahoo.com			
Surface Owner Information: Name: Daryl T. &/or Linda S. Fink	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: 1614 Grand Avenue	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.		
Address 2:			
City: Parsons State: KS Zip: 67357 +			
 the KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered a 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 filling in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). I 	acknowledge that, because I have not provided this information, the		
task, I acknowledge that I am being charged a \$30.00 handlin	owner(s). To mitigate the additional cost of the KCC performing this ag fee, payable to the KCC, which is enclosed with this form. If the fee is not received with this form, the KSONA-1		
form and the associated Form C-1, Form CB-1, Form T-1, or Form CF	5-1 will be returned.		
I hereby certify that the statements made herein are true and correct t	6		
Date: 09/16/13 Signature of Operator or Agent: 20m	La Gallo Title: Authorized Agent		

RECEIVED KANSAS CORPORATION COMMISSION

OCT 2 3 2013

CONSERVATION DIVISION WICHITA, KS