KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form I-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: Effective Date of Transfer: __JANUARY 2, 2014 Oil Lease: No. of Oil Wells _ Gas Lease: No. of Gas Wells 4 KS Dept of Revenue Lease No.: 231409, 231410, 231411, 232043 Gas Gathering System:_ Lease Name: RICE Saltwater Disposal Well - Permit No.: _ _- ___ N2 Sec. 34 Twp. 3S R. 42 E V W Spot Location: ____ __feet from N / S Line Legal Description of Lease: LOCATED IN THE N2 OF SECTION 34, feet from TOWNSHIP 3 SOUTH, RANGE 42 WEST Enhanced Recovery Project Permit No.: _ County: _CHEYENNE Entire Project: Yes No KCC WICHITA Number of Injection Wells Production Zone(s):_NIOBRARA JAN 14 2014 Field Name: CHERRY CREEK 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: Workover $\rho \mathcal{L} \square$ Drilling Emergency Burn Settling Haul-Off Contact Person: MATTHEW A. WURTZBACHER Past Operator's License No. 34110_ Past Operator's Name & Address: <u>CAERUS</u> KANSAS LLC Phone: 303-565-4600 600 17TH STREET, SUITE 1600N, DENVER, CO 80202 Title: PRESIDENT Signature: New Operator's License No. 35011 Contact Person: MATTHEW A. WURTZBACHER New Operator's Name & Address: CAERUS WASHCO LLC Phone: 303-565-4600 600 17TH STREET, SUITE 1600N, DENVER, CO 80202 Oil / Gas Purchaser: Title: PRESIDENT 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. 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 _

Must Be Filed For All Wells
21.34 31.34 41.34 はた34

KDOR Lease No.: 231409, 231410, 231411, 232043

* Lease Name:	RICE		* Location:	N2 OF SECTION 34, T3	S-R42W
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)
11A-34	1502321094 🗸	Circle 330 FNL FSL/FNL	Circle 537 FWL FEL/FWL	GAS	PROD
21-34	1502321095/	330 FNL FSL/FNL	2160 FWL FEL/FWL	GAS	PROD
31-34	1502320836/	530 FNL FSL/FNL	2290 FEL FEL/FWL	GAS	PROD
41-34	1502321096 /	333 FNL FSL/FNL	610 FEL FEL/FWL	GAS	PROD
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		_
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		KCC WICHITA
		FSL/FNL	FEL/FWL		JAN 1 4 2014
		FSL/FNL	FEL/FWL		RECEIVED
		FSL/FNL	FEL/FWL		

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

July 2010 OIL & GAS CONSERVATION DIVISION Form Must Be Typed Form must be Signed **CERTIFICATION OF COMPLIANCE WITH THE** All bushks must be Filled 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.

ODEDATOR: 1: # JUU I I	Well Leastion		
OPERATOR: License # 35011 Name: CAERUS WASHCO LLC			
Name: OALKOO WASTOO ELEO Address 1: 600 17TH STREET, SUITE 1600N	County: CHEYENNE		
Address 2:	Lease Name: RICE Well #:		
Dity: DENVER State: CO Zip: 80202 +			
Contact Person: MATTHEW A. WURTZBACHER	the lease below:		
Contact Person: MATTHEW A. WURTZBACHER Phone: (303) 565-4600 Fax: (303) 565-4606	LOCATED IN THE N2 OF SECTION 34,		
Email Address:	T3S-R42W		
Surface Owner Information:			
Name: KEITH RICE	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: HC 1 BOX 47	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.		
Oity: ST. FRANCIS State: KS Zip: 67756 +	_		
are preliminary non-binding estimates. The locations may be entered	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.		
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JAN 14 2014

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