080114_Eubank_D.pdf

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, MUST be submitted with this form.

Check Applicable Boxes:

- [x] Oil Lease: No. of Oil Wells 5 **
- [ ] Gas Lease: No. of Gas Wells ____ **
- [ ] Gas Gathering System: ____
- [ ] Saltwater Disposal Well - Permit No.: ____
  Spot Location: ____ feet from [ ] N / [ ] S Line
  ____ feet from [ ] E / [ ] W Line
- [ ] Enhanced Recovery Project Permit No.: ____
  Entire Project: [ ] Yes [ ] No
  Number of Injection Wells ____ **
- Field Name: EUBANK

Effective Date of Transfer: 08/01/2014

KS Dept of Revenue Lease No.: 108892 ✓

Lease Name: EUBANK "D"

__ - __ - __ - __ Sec. 33 Twp. 28S R. 34 [ ] E [x] W

Legal Description of Lease: ALL of SEC. 33-TWP. 28S-R. 34W

County: HASKELL

Producing Zone(s): CHST SD, MARMATON AND KANSAS CITY B

Injection Zone(s): ____

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WICHITA, KS

**** Side Two Must Be Completed.**

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 [ ] Drilling KH

Past Operator's License No. 33094 ✓
Past Operator's Name & Address: Cimarex Energy Co.
202 S. Cheyenne Ave., Suite 1000, Tulsa, OK. 74103
Title: Production Administration Supervisor

Contact Person: Genea Holloway
Phone: 918-295-1658
Date: 07/25/2014
Signature: Genea Holloway

New Operator's License No. 34997 ✓
New Operator's Name & Address: Casillas Petroleum Corp.
401 S. Boston Ave., Suite 2400
Tulsa, OK. 74103
Title: President/CEO

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Contact Person: Greg R. Casillas
Phone: 918-582-5310
Oil / Gas Purchaser: Regency - NCRA
Date: 8-1-14
Signature: ____

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 may continue to inject fluids as authorized by Permit No.: ____. Recommended action: ____

Date: ____ ____
Authorized Signature

____ is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.: ____.

Date: ____ ____
Authorized Signature

DISTRICT ____ EPR 10-31-14 PRODUCTION NOV 03 2014 UIC NOV 03 2014
Mail to: Past Operator ____ New Operator ____ District ____

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

Side Two

Must Be Filed For All Wells

KDOR Lease No.: 108892 ✓

* Lease Name: EUBANK "D" * Location: ALL of SEC. 33-TWP. 28S-R. 34W

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	15-081-10075-0000 ✓	1980 (Circle FSL)/FNL	1980 (Circle FEL)/FWL	OIL	TA'D
2	15-081-10079-0001 ✓	3300 (FSL)/FNL	660 (FEL)/FWL	OIL	PROD
3	15-081-10076-0000 ✓	660 (FSL)/FNL	660 (FEL)/FWL	OIL	PROD
4	15-081-10077-0000 ✓	660 FSL/(FNL)	1980 (FEL)/FWL	OIL	PROD
5	15-081-21349-0000 ✓	330 (FSL)/FNL	330 (FEL)/FWL	OIL	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		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

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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
January 2014
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) ☒ **T-1** (Transfer) ☐ **CP-1** (Plugging Application)

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OPERATOR: License # 33094
Name: Cimarex Energy Co.
Address 1: 202 S. Cheyenne Ave.
Address 2: Suite 1000
City: Tulsa State: OK. Zip: 74103 + ____
Contact Person: Genea Holloway
Phone: (918) 295-1658 Fax: (918) 512-4120
Email Address: gholloway@cimarex.com

Well Location:
____ - ____ - ____ - ____ Sec. 33 Twp. 28 S. R. 34 ☐ East ☒ West
County: HASKELL
Lease Name: EUBANK "D" Well #: 1,2,3,4,5

If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
ALL of SEC. 33-TWP. 28S-R. 34W

Surface Owner Information:
Name: HAROLD MYRON EDMONSTONK & M SWANSON TR
Address 1: 1962 CR 29
Address 2:
City: PROTECTION State: KS Zip: 67127 + ____

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.

If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and the KCC with a plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat are preliminary non-binding estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.

Select one of the following:

☒ I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface owner(s) of the land upon which the subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this form; and 3) my operator name, address, phone number, fax, and email address.

☐ I have not provided this information to the surface owner(s). I acknowledge that, because I have not provided this information, the KCC will be required to send this information to the surface owner(s). To mitigate the additional cost of the KCC performing this task, I acknowledge that I must provide the name and address of the surface owner by filling out the top section of this form and that I am being charged a $30.00 handling fee, payable to the KCC, which is enclosed with this form.

If choosing the second option, submit payment of the $30.00 handling fee 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 CP-1 will be returned.

I hereby certify that the statements made herein are true and correct to the best of my knowledge and belief.

Date: 9/19/2014 Signature of Operator or Agent: Genea Holloway Title: Production Administration Supervisor

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