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:	tea with this form. I		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 08/01/2014		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 202054 - 221797 Lease Name: JONES		
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease: ALL of Sec. 32- Twp.26S - R.34W		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: FINNEY		
Number of Injection Wells **	Production Zone(s): CHASE GROUP		
Field Name: HUGOTON GAS AREA			
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pit, WO or Haul)	feet from		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling		
Past Operator's License No	Contact Person: Genea Holloway		
Past Operator's Name & Address: Cimarex Energy Co.	Phone: 918-295-1658		
202 S. Cheyenne Ave., Suite 1000, Tulsa, OK. 74103	Date: 08/07/2014		
Title: Production Administration Supervisor	Signature Seren Holland		
	Signatur		
New Operator's License No. 34997	Contact Person: Greg R. Casillas		
New Operator's Name & Address: Casillas Petroleum Corp.	918-582-5310		
401 S. Boston Ave., Suite 2400	KANSAS CORPORATION COMMISSIC		
Tulsa, OK. 74103 Received KANSAS CORPORATION COMMISSION	Oil / Gas Purchaser: Degency SEP 12 2014		
'/ C '2016	Date.		
	Signature: CONSERVATION DIVISION WICHITA, KS		
CONSERVATION DIVISION WICHITA, KS			
Acknowledgment of Transfer: The above request for transfer of injection a	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 a	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		
Permit No.: Recommended action:	permitted by No.:		
	,		
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR _//-7-/4	PRODUCTION NOV 1 2 2014 UINOV 1 2 2014		
Mail to: Past Operator New Operato			

Side Two

Must Be Filed For All Wells

* Lease Name	: JONES		* Location:A	LL of Sec. 32 - Twp.26	S - 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
4	15-055-00746-0000	2310 Circle	2310 Circle	GAS	PROD
4-2	15-055-01009-0001	2050 FSI FNL	660 FELFWL	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		
	Received KANSAS CORPORATION COMMIS	SION FSL/FNL	FEL/FWL		Received
	SEP 2 6 2014		FEL/FWL		S CORPORATION COMMISSION
	CONSERVATION DIVISION WICHITA, KS	NFSL/FNL	FEL/FWL		SEP 12 2014 PASERVATION DIVISION
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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)		
OPERATOR: License # 33094	Well Location:		
Name: Cimarex Energy Co.	Sec. 32 Twp. 26 S. R. 34 East 🗵 West		
Address 1: 202 S. Cheyenne Ave.	County: FINNEY		
Address 1: 202 S. Cheyenne Ave. Address 2: Suite 1000	Lease Name: JONES Well #: 4 AND 4-2		
City: Tulsa State: OK. Zip: 74103 +			
Contact Percent Genea Holloway	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Contact Person: Genea Holloway Phone: (918) 295-1658 Fax: (918) 512-4120	ALL of Sec. 32 - Twp.26S - R.34W		
Email Address: gholloway@cimarex.com			
Surface Owner Information: Name: CATTLE EMPIRE LLC Address 1: 1174 EMPIRE CIRCLE	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		
Address 2:	county, and in the real estate property tax records of the county treasurer.		
City: SATANTA State: KS Zip: 67870 + 9600			
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
	ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this		
KCC will be required to send this information to the surface ow	cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handling form 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.		
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.		
08/18/2014 Date: Signature of Operator or Agent	Production Administration Supervisor		
Received KANSAS CORPORATION COMMISSION	Received KANSAS CORPORATION COMMISSION		

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