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:	ittea with this form.		
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.: 108920		
Gas Gathering System:	Lease Name: PLEASANT PRAIRIE		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	<u>NE - NW Sec. 05 Twp. 27S R. 34</u> E V W		
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	NE-NW of SEC. 05-TWP. 27S - R. 34W		
Entire Project: Yes No	County: HASKELL		
Number of Injection Wells **	Production Zone(s):		
Field Name: PLEASANT PRAIRIE	Injection Zone(s):		
** 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)			
Type of Pit: Emergency Burn Settling			
Past Operator's License No. 33094	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: 09/10/2014		
Title: Production Administration Supervisor	$\mathcal{L}_{\mathcal{L}}}}}}}}}}$		
Title:	Signature: Wall Well		
2/1007 /	Grog P. Cacillae		
New Operator's License No. 34997	Contact Person: Greg R. Casillas		
New Operator's Name & Address: Casillas Petroleum Corp. Received	Phone: 918-582-5310		
401 S. Boston Ave., Suite 2400 KANSAS CORPORATION COMMISSION	Oil / Gas Purchaser: NCRA		
Tulsa, OK. 74103 SEP 2 6 2014	Date:		
Title: President/CEO CONSERVATION DIVISION	Signature:		
WICHITA, KS			
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		
Permit No.: Recommended action:	permitted by No.:		
Date			
Date:	Date: Authorized Signature		
	PRODUCTION NOV 1 2 2014 UNOV 1 2 2014		
Mail to: Past Operator New Operat			

Side Two

Must Be Filed For All Wells

KDOR Lease	No.:				
* Lease Name:	PLEASANT PRAIRIE		* Location:	NE-NW of SEC. 05-TWF	2. 27S - R. 34W
Well No.	API No. (YR DRLD/PRE '67)	Footage from S (i.e. FSL = Feet from		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
53	15-081-00026-0000	4620 FSL/FNL	3300 (FE)/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		-
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	·	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	Received	FSL/FNL	FEL/FWL		
	KANSAS CORPORATION CO	FSL/FNL	FEL/FWL		
	SEP 2 6 20	ESI /ENI	FEL/FWL		
	CONSERVATION DIVI WICHITA, KS	SION FSL/FNL			
			FEL/FVVL		

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) X T-1 (Transfer) CP-1 (Plugging Application)
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: NENW_Sec. 05Twp. 27S. R. 34 East ▼ West County: HASKELL Lease Name: PLEASANT PRAIRIE Well #: 53 If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: NE-NW of SEC. 05-TWP. 27S - R. 34W
Surface Owner Information: Name: TLW LAND & CATTLE LP Address 1: PO BOX 2410 Address 2: City: OKLAHOMA CITY State: OK Zip: 73118 + 2410	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.
the KCC with a plat showing the predicted locations of lease roads, tan	odic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land upon which the subject well is or will be I	Act (House Bill 2032), I have provided the following to the surface located: 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 and email address.
KCC will be required to send this information to the surface or	acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this is 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-	g fee with this form. If the fee is not received with this form, the KSONA-1 -1 will be returned.
I hereby certify that the statements made herein are true and correct to Date: Date: Received Signature of Operator or Agent:	the best of myknowledge and belief. Production Administration Supervisor Title:

SEP 2 6 2014