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,

Rece**MUST** be submitted with this form. Check Applicable Boxes: KANSAS CORPORATION COMMISSION 08/01/2014 Effective Date of Transfer: Oil Lease: No. of Oil Wells SER 26 2014 KS Dept of Revenue Lease No.: 222319 Gas Lease: No. of Gas Wells CONSERVATION DIVISION Lease Name: BROWN A Gas Gathering System: WICHITA, KS Saltwater Disposal Well - Permit No.: _sw _ sw _ NW Sec. 34 Twp. 25 R. 34 EVW feet from N / SW - SW - NW of Sec. 34 - Twp. 25 - R. 34W Legal Description of Lease: . feet from E / W Line Enhanced Recovery Project Permit No.: County: Finney Entire Project: Yes No Number of Injection Wells Production Zone(s): Hugoton Field Name: Injection Zone(s): ** Side Two Must Be Completed. S Line of Section N / feet from Surface Pit Permit No.: _ (API No. if Drill Pit, WO or Haul) W Line of Section feet from Settling Haul-Off Workover Emergency Burn Type of Pit: Genea Holloway Contact Person: Past Operator's License No. Cimarex Energy Co. Phone: 918-295-1658 Key Production Company, Inc. Past Operator's Name & Address: 07/25/2014 202 S. Cheyenne Ave., Suite 1000, Tulsa, OK. 74103 Date: **Production Administration Supervisor** Received KANSAS CORPORATION C Contact Person: Greg R. Casillas 34997 New Operator's License No. FEB 0 2 2015 Phone: 918-582-5310 Casillas Petroleum Corp. New Operator's Name & Address: CONSERVATION DEVISION Oil / Gas Purchaser: NCRA 401 S. Boston Ave., Suite 2400 Received KANSAS CORPORATION COMMISSION Tulsa, OK. 74103 President/CEQ Signature: CONSERVATION DIVISION 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. is acknowledged as is acknowledged as the new operator of the above named lease containing the surface pit the new operator and may continue to inject fluids as authorized by permitted by No.: ___ _____. Recommended action: Date: Authorized Signature Authorized Signature 0 3 2015 DISTRICT -New Operator Mail to: Past Operator _

Must Be Filed For All Wells

	BROWN A				
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)
1-2	15-055-21614-0000	2715 Circle	4855 FED FWL	Gas	PROD
		FSL/FNL	FEL/FWL		
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	Received KANSAS CORPORATION COMMISSION	N FSL/FNL	FEL/FWL		
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	CONSERVATION DIVISION WICHITA, KS	FSL/FNL	FEL/FWL		
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		FSL/FNL		CONSERVATION DIVIS WICHITA, KS	ION

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 (Ca	thodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
Received			
KANSAS CORPORATION COMMISSIO			
OPERATOR: License # 32621 Key Production Company, Inc. SEP 2 6 2014	Well Location:		
Name: 110) / / / / / / / / / / / / / / / / / / /	SW-SW-NW Sec. 34 Twp. 25 S. R. 34 East West		
Address 1: 202 S. Cheyenne Ave. CONSERVATION DIVISION WICHITA, KS	County: FINNEY		
Address 2: Suite 1000	Lease Name: BROWN A Well #: 1-2		
City: Tulsa State: OK. Zip: 74103 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: Genea Holloway	the lease below:		
Contact Person: Genea Holloway Phone: (918) 295-1658 Fax: (918) 512-4120 Reco	ATION COMMISSION		
aballaway@aimaray.com	2 2015		
WICH	ION D IVISION ITA, KS		
Surface Owner Information:			
Name: WHEATLAND ELECTRIC COOPERATIVE, INC	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 1: PO BOX 1078			
Address 2:	county, and in the real estate property tax records of the county treasurer.		
City: GARDEN CITY State: KS Zip: 67846 + 1078			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodi the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:	batteries, pipelines, and electrical lines. The locations shown on the plat		
I certify that, pursuant to the Kansas Surface Owner Notice Acowner(s) of the land upon which the subject well is or will be loc CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form eing 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 own	knowledge that, because I have not provided this information, the ner(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 CC, 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-1			
I hereby certify that the statements made herein are true and correct to to Date: 919 8014 Signature of Operator or Agent	he best of my knowledge and belief. Production Administration Supervisor Title:		
	Received KANSAS CORPORATION COMMISSION		

SEP 1 1 2014