### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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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

Rece <b>MAST</b> he subn	e with the Kansas Surface Owner Notification Act, nitted with this form.
Check Applicable Boxes: KANSAS CORPORATION COMMISSION	Effective Date of Transfer: 08/01/2014
Oil Lease: No. of Oil Wells SEP. 2 6 2014	Effective Date of Industria.
Gas Lease. No. of Gas Wells	KS Dept of Revenue Lease No.: 220860
Gas Gathering System: CONSERVATION DIVISION WICHITA, KS	Lease Name: CARLTON
Saltwater Disposal Well - Permit No.:	<u>NW _ NE _ NW Sec. 6 Twp. 26 R. 34 </u> EVW
Spot Location:feet from N / S Line	Legal Description of Lease: NW-NE-NW of Sec.6 - Twp.26 - R.34W
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Finney
Number of Injection Wells**	Production Zone(s): Wase Group
i $i$ $i$ $i$ $i$ $i$ $i$ $i$ $i$ $i$	
Field Name: NUGOTON GOS HINCO  ** 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 E / W Line of Section
Type of Pit: Emergency Burn Settling	☐ Haul-Off ☐ Workover ☐ Drilling
Past Operator's License No. 32021	Contact Person: Genea Holloway
Kay Braduation Company des	Phone: 918-295-1658
rasi Operator s reame a riagross.	07/25/2014
202 S. Cheyenne Ave., Suite 1000, Tulsa, OK. 74103	Date:
Title: Production Administration Supervisor	Signature: Market National Received
New Constant License No. 34997	Contact Person: Greg R. Casillas
New Operator's License No.	Phone: 918-582-5310
New Operator's Name & Address: Casillas Petroleum Corp.	CONSERVATION DIVISION
401 S. Boston Ave., Suite 2400	Oil / Gas Purchaser: NCRA TREATH WICHTE KS
Tulsa, OK. 74103 Received KANSAS CORPORATION COMMISSION	Date: 8-/-14
Title: President/CEO SEP 11 2014	Signature:
CONSERVATION DIVISION	/
Acknowledgment of Transfer: The above requestion transfer of injection	
	on Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the	ne 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 15
DISTRICT EPR 2-2-15	PRODUCTION FEB 0 3 2015 UIC UIC
Mail to: Past Operator New Ope	rator District

#### Side Two

#### Must Be Filed For All Wells

	No.: 220860			NA/ NIC NNA/ -4 O O - T	26 D 24M
Lease Name:	CARLTON		* Location: N	W-NE-NW of Sec.6 - T	wp.26 - 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
1-2	15-055-21445-0001 <sup>/</sup>	330 Circle	1650 Circle	Gas	PROD
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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	CONSERVATION DIVISION	FSL/FNL	FEL/FWL	Astra	
	WICHITA, KS	FSL/FNL	FEL/FWL	411	
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		FSL/FNL	FEL/FWL		2014
<del></del>			FEL/FWL	CONSERVATION	
			FEL/FWL	WICHITA,	

A separate sheet may be attached if necessary

<sup>\*</sup> 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 Received KANSAS CORPORATION COMMISSIO			
OPERATOR: License # 32621 SEP 2 6 2014  Name: Key Production Company, Inc  Address 1: 202 S. Cheyenne Ave.  CONSERVATION DIVISION WICHITA, KS	Well Location:  NW_NE_NW Sec. 6 Twp. 26 S. R. 34 East west  County: FINNEY		
Address 2: Suite 1000	Lease Name: CARLTON Well #: 1-2		
City: Tulsa State: OK. Zip: 74103 +  Contact Person: Genea Holloway  Phone: ( 918 ) 295-1658 Fax: ( 918 ) 512-4120 CANSAS CORF	If filling a Form T-1 for multiple wells on a lease, enter the legal description of		
CONSE	RVATION DIVISION NICHITA, KS		
Surface Owner Information:  Name: WHEATLAND ELECTRIC COOPERATIVE, INC  Address 1: PO BOX 1078  Address 2:  City: GARDEN CITY State: KS Zip: 67846 + 1078	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 (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 Ac owner(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	eated: 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		
☐ I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface own task, I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KC	per(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		
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: 9 19 2014 Signature of Operator or Agent	he best of my knowledge and belief.  Production Administration Supervisor  Title:  Received		
	KANSAS CORPORATION COMMISSION		