KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 7-1

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, Received MUST be submitted with this form.

KANSAS CORPORATION COMMISSION Check Applicable Boxes: 08/01/2014 Effective Date of Transfer: Oil Lease: No. of Oil Wells Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 222189 CONSERVATION DIVISION Gas Gathering System: Lease Name: CITIZENS BUILDING & LOAN Saltwater Disposal Well - Permit No.: _ NE _ SE Sec. 35 Twp. 26 R. 35 feet from SW-NE-SE of Sec.35- Twp.26 - R.35W Legal Description of Lease: feet from Enhanced Recovery Project Permit No.: County: Kearny Entire Project: Yes No Number of Injection Wells Production Zone(s): Field Name: Injection Zone(s) ** Side Two Must Be Completed. S Line of Section Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul) W Line of Section Haul-Off Workover Settling Type of Pit: Emergency Genea Holloway Contact Person: Past Operator's License No. imarex Energy Phone: 918-295-1658 Key Production Company Past Operator's Name & Address: 202 S. Cheyenne Ave., Suite 1000, Tulsa, OK. 74103 Date: **Production Administration Supervisor MCC WIC** FEB 0.2 2015 Greg R. Casillas Contact Person: New Operator's License No. Phone: 918-582-5310 Casillas Petroleum Corp New Operator's Name & Address: 401 S. Boston Ave., Suite 2400 Oil / Gas Purchaser: Received KANSAS CORPORATION COMMISSION Tulsa, OK. 74103 2014 President/CEO Signature: CONSERVATION DIVISION WICHITA, KS 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 the new operator and may continue to inject fluids as authorized by the new operator of the above named lease containing the surface pit permitted by No.: . . Recommended action: Date: Authorized Signature Authorized Signature DISTRICT -New Operator Mail to: Past Operator.

Side Two

Must Be Filed For All Wells

	No.: 222189 / CITIZENS BUILDING & LOA	N.	* Location:S	W-NE-SE of Sec.35- T	wp.26 - R.35W
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)
7-2	15-093-21611-0000 [/] _	1416 Circle 1460 (FS) FNL	1280 FELFWL	Gas	PROD
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			FEL/FWL		
NA VI					
		FSL/FNL	FEL/FWL		
	Roceived KANSAS CORPORATION COMMISSIO	FSL/FNL	FEL/FWL		
	SEP Z 6 2014	FSL/FNL	FEL/FWL	KCC A	VICHITA
	CONSERVATION DIVISION	FSL/FNL	FEL/FWL	FEB 0	2 2015
	WICHITA, KS	FSL/FNL	FEL/FWL	REC	EIVED
		FSL/FNL	FEL/FWL		
	***	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	Rece KANSAS CORPORA	eived
		FSL/FNL	FEL/FWL		1 2014
				CONCEDUATION	ON DIVISION

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 (Cat	chodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 32621 Name: Key Production Company, Inc Address 1: 202 S. Cheyenne Ave. Address 2: Suite 1000 City: Tulsa Contact Person: Genea Holloway Phone: (918) 295-1658 Email Address: gholloway@cimarex.com Received KANSAS CORPORATION COMMISSION CONSERVATION DIVISION WICHITA, KS Zip: 74103 Fax: (918) 512-4120 KCC WICHITA	Well Location: SW_NE_SE_Sec. 35_Twp. 26_S. R. 35East west County: Kearny Lease Name: CITIZENS BUILDING & LOAN Well #: 7-2 If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Surface Owner Information: FEB 02 201 Name: PHILLIP MEYER Address 1: 2201 W 31ST ST S Address 2:	3
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic the KCC with a plat showing the predicted locations of lease roads, tank be are preliminary non-binding estimates. The locations may be entered on the Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice Act	eatteries, pipelines, and electrical lines. The locations shown on the plat 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 local 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 I have not provided this information to the surface owner(s). I ack	ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this demail address. Inowledge that, because I have not provided this information, the
KCC will be required to send this information to the surface owner 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 If choosing the second option, submit payment of the \$30.00 handling fee form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1.	f the surface owner by filling out the top section of this form and CC, which is enclosed with this form. The with this form. If the fee is not received with this form, the KSONA-1
I hereby certify that the statements made herein are true and correct to the Date: 9 19 80 14 Signature of Operator or Agent Huse	- 4

Received KANSAS CORPORATION COMMISSION