Kansas Corporation Commission

July 2014 OIL & GAS CONSERVATION DIVISION 111315_Feikert_SE.pdf 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,

Check Applicable Boxes:	be submitted with this form.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 9 11/2015 /1/13/15			
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 230503			
Gas Gathering System:				
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Lir				
feet from E / W Lir				
Enhanced Recovery Project Permit No.:	Section 7, Township 2S Range 41 West			
Entire Project: Yes No	County: Cheyenne			
Number of Injection Wells**	Production Zone(s): Niobrara			
Field Name: Cherry Creek	Injection Zone(s):			
** Side Two Must Be Completed.				
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 OL Drilling			
Past Operator's License No. 35011 🗸	Contact Person: Matthew Wurtzbacher			
Past Operator's Name & Address: Caerus WashCo LLC	Phone: 303-565-4600			
600 17th Street, Suite 1600 N, Denver CO 80202				
President	Mand of Att ()			
Title:	Signature: Malkint Curry Sacker			
New Operator's License No. 35266	Contact Person: Keith (Bud) Rice			
New Operator's Name & Address: Rockin G Energy LLC	Phone: 970-773-3969			
650 Silver Spur Dr	()			
Weatherford TX 76087				
	Date: //- 20-/5 DEC 1.1 2015			
Title: Operations Manager	Signature: //wwwRECEIVED			
Acknowledgment of Transfer: The above request for transfer of	injection authorization, surface pit permit # has been			
	poration Commission. This acknowledgment of transfer pertains to Kansas Corporation			
Commission records only and does not convey any ownership interest	est in the above injection well(s) or pit permit.			
is acknowledge	ged as is acknowledged as			
the new operator and may continue to inject fluids as authorize				
Permit No.: Recommended action:	, l			
. Recommended action:	permitted by No.:			
Date:	Date:			
Authorized Signature	Authorized Signature			
DISTRICT' 1-25-16 EPR 1-26-16	PRODUCTION 1.27.16 UNAN 27 2016			
1	w Operator District			

Side Two

Must Be Filed For All Wells

KDOR Lease	_{3 No.:} 230503		· · · · · ·			
* Lease Name	Feikert		* Location:	*Location: W/2 SESE Section 7 T2S-R41W		
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)	
44-7	15-023-20703 √	760 ESL	1035 FEL FWL	Gas	TA'D	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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			FEL/FWL			
			FEL/FWL			
			FEL/FWL		-	
		FSL/FNL			******	

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 July 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.

35266			
OPERATOR: License # 35266	Well Location:		
Name: Rockin G Energy LLC	W /2 _SE_SE Sec. 7 Twp. 2 S. R. 41 ☐ East ¥ West		
Address 1: PO Box 476	County: Cheyenne		
Address 2: 650 Silver Spur Dr	Lease Name: Feikert Well #: 7-15-1		
City: Weatherford State: TX Zip: 76087 + Contact Person: Bud Rice	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Phone: (970) 773-3969 Fax: (West/2 of the SE-SE of Section 7, Township 2S Range 41 West		
	r A		
	ACHITA		
Name: Blake & Stephanie Feikert Address 1: 590 Road W Address 2: City: St Francis State: KS Zip: 67756 +	When filling a Form T-1 involving multiple surface owners, attach an additional 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,	athodic Protection Borehole Intent), you must supply the surface owners and tank batteries, pipelines, and electrical lines. The locations shown on the plat ted on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
☑ I certify that, pursuant to the Kansas Surface Owner Notic	ice Act (House Bill 2032), I have provided the following to the surface		
owner(s) of the land upon which the subject well is or will I CP-1 that I am filing in connection with this form; 2) if the fo form; and 3) my operator name, address, phone number, fa	orm being filed is a Form C-1 or Form CB-1, the plat(s) required by this		
CP-1 that I am filing in connection with this form; 2) if the fo form; and 3) my operator name, address, phone number, fa I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface	orm being filed is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address. I acknowledge that, because I have not provided this information, the se owner(s). To mitigate the additional cost of the KCC performing this lives of the surface owner by filling out the top section of this form and		
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