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, RecMUST be submitted with this form. Check Applicable Boxes: KANSAS CORPORATION COMMISSION Effective Date of Transfer: __08/01/2014 Oil Lease: No. of Oil Wells Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 204225 Gas Gathering System: CONSERVATION DIVISION Lease Name: WAGNER 5 WICHITA, KS Saltwater Disposal Well - Permit No.: C __SW __ SW __ NE _Sec. _5 _ Twp. _25S _ R. _3.H _ T E V W feet from N / S Line Legal Description of Lease: C-SW-SW-NE of Sec.5-Twp.25S-R.3⁴W feet from | E / | W Line Enhanced Recovery Project Permit No.: County: Finney Entire Project: Yes No Number of Injection Wells _ Production Zone(s): CHASE GROUP Field Name: HUGOTON GAS AREA Injection Zone(s): ** Side Two Must Be Completed. feet from N/ 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 Burn Genea Holloway 33094 / Contact Person: Past Operator's License No. Phone: 918-295-1658 Cimarex Energy Co. Past Operator's Name & Address: _ 202 S. Cheyenne Ave., Suite 1000, Tulsa, OK. 74103 Date: Production Administration Supervisor 34997 Greg R. Casillas Contact Person: New Operator's License No. Received Casillas Petroleum Corp. New Operator's Name & Address: 401 S. Boston Ave., Suite 2400 Tulsa, OK. 74103 **CONSERVATION DIVISION** President/CEO WICHITA, KS Signature: 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 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: Permit No.: Date: Authorized Signature PRODUCTION DISTRICT ____ District Mail to: Past Operator _ **New Operator**

Side Two

Must Be Filed For All Wells

KDOR Lease	e No.:204225				
* Lease Name	WAGNER 5		* Location:C	S-SW-SW-NE of Se	c.5-Twp.25S-R.34W
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet from		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
5	1 <u>5-055-00594-0000</u>	2540 Circle	2540 FEL/FWL	GAS	PROD
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	182-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3	
		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		_
<u></u>		FSL/FNL	FEL/FWL		LASO VALORITE
		FSL/FNL	FEL/FWL		KCC WICHTA
		FSL/FNL	FEL/FWL		FEB 0 2 2015
		FSL/FNL	FEL/FWL		RECEIVED
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		_
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		

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 (CRECIVED KANSAS CORPORATION COMMISSION	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 33094 SEP 2 6 2014 Name: Cimarex Energy Co. Address 1: 202 S. Cheyenne Ave. Suite 1000	Well Location: CSW_SW_NE_Sec. 5Twp. 25_S. R. 34East X West County: FINNEY
Address 2: Suite 1000	Lease Name: WAGNER 5 Well #: 5
Contact Person: Genea Holloway Phone: (918) 295-1658 Fax: (918) 512-4120	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: CONICETA. B 0 2 2015
	RECEIVED
Surface Owner Information: Name: WHEATLAND ELECTRIC COOPERATIVE, INC Address 1: PO BOX 1078 Address 2:	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 (Cathodia the KCC with a plat showing the predicted locations of lease roads, tank to 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	patteries, 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. (House Bill 2032), I have provided the following to the surface
owner(s) of the land upon which the subject well is or will be loce 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	ing 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 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	er(s). To mitigate the additional cost of the KCC performing this fithe surface owner by filling out the top section of this form and
If choosing the second option, submit payment of the \$30.00 handling fed form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 v	e with this form. If the fee is not received with this form, the KSONA-1 will be returned.
hereby certify that the statements made herein are true and correct to the Date 9 19 20 14 Signature of Operator or Agents	Production Administration Supervisor Title:
	Received KANSAS CORPORATION COMMISSION

SEP 12 2014