

Kansas Corporation Commission
Oil & Gas Conservation Division

Form T-1

June 2000

Form must be Typed

Form must be Signed

All blanks must be Filled

REQUEST FOR CHANGE OF OPERATOR
TRANSFER OF INJECTION OR SURFACE POND PERMIT

Check Applicable Boxes:

☒ Oil Lease: No. of Wells 1☐ Gas Lease: No. of Wells _____

** Side Two Must Be Completed **

☐ Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N / S Line

_____ feet from E / W Line

☐ Enhanced Recovery Proj. Docket No. _____Entire project: ☐ Yes ☐ No

Number of injection wells _____

Field Name EUBANK SOUTHEffective Date of Transfer 12/1/2004Lease Name ADAMS L-3 (CHESTER)_____ - _____ - _____ 33 Sec 29 T 34 R ☐ East ☒ West

Legal Description of Lease: _____

County HASKELLProduction Zone(s) BASAL CHESTER

Injection Zone(s) _____

Surface Pond Permit # _____
(API No. If Drill Pit)Identify: ☐ Emergency Pit ☐ Burn Pit☐ Storage Pit

Feet from N / S Line of Section _____

Feet from E / W Line of Section _____

☐ Drill PitRECEIVED
KANSAS CORPORATION COMMISSIONPast Operator's License No. 4549Contact Person: JIM LAFEVERS

DEC 20 2004

Past Operator's Name and Address ANADARKO PETROLEUMPhone 832-636-3127CONSERVATION DIVISION
WICHITA, KSDate 11/23/2004Title ENVIRONMENT AND REGULATORY AFFAIRS SUPVSignature Jim LafeversNew Operator's License No. 32446Contact Person: LYNNE MOONNew Operator's Name and Address MERIT ENERGY COMPANYPhone 972-701-8377Oil/Gas Purchaser National Cooperative RefiningDate 11/29/2004Title SR. LAND/REGULATORY ADMINISTRATORSignature Lynne Moon

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pond permit # _____ has been noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgement of transfer pertains to Kansas Corporation Commission records only and does not convey any ownership interest in the above injection well(s) or pond permit.

_____ is acknowledged as the new operator and may continue to inject fluids as authorized by Docket# _____. Recommended action _____

Date _____
Authorized Signature

_____ is acknowledged as the new operator of the above named lease containing the surface pond permitted by # _____

Date _____
Authorized Signature

FEB 2/28/05 MAR 07 2005 3/1/05

SCANNED

Side Two

Must Be Filled For All Wells

* Lease Name

ADAMS L-3 (CHESTER)

* Location

33 29 S ³⁴/₂₀ W

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)
<u>L-3</u>	<u>1508121104 -0001 ✓</u>	<u>330S</u>	<u>OIL</u>	<u>PROD</u>
		Circle FSL/FNL <u>2060E</u>	Circle 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	
		FSL/FNL	FEL/FWL	
		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 for each lease. If a lease covers more than one section please indicate which section each well is located.