120104- Claypool - D-1-21-plf

Kansas Corporation Commission Oil & Gas Conservation Division

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

Form T-1
June 2000
Form must be Typed
Form must be Signed
All blanks must be Filled

TRANSPER OF INJECTION OR SURFACE FOND PERIOR	
Check Applicable Boxes: DCR 208376	Effective Date of Transfer 12/1/2004
Oil Lease: No. of Wells	Lease Name CLAYPOOL D-1-21
X Gas Lease: No. of Wells1	
** Side Two Must Be Completed **	
Saltwater Disposal Well - Docket No.	Legal Description of Lease:
Spot Location: feet from N / S Line	
feet from E / W Line	
Enhanced Recovery Proj. Docket No	County KEARNY
Entire project: Yes No	Production Zono(a) CONNECT CONNECT
Number of injection wells	Production Zone(s)COUNCIL_CROVE
Field Name PANOMA	Injection Zone(s)
Surface Pond Permit #	Feet from N / S Line of Section
(API No. If Drill Pit)	Feet from E / W Line of Section
Identify: Emergency Pit Burn Pit	Storage Pit Drill Pit RECEVED KANSAS CORFORMUSER
Past Operator's License No. 6417 33/36	Contact Person: JIM LAFEVERS DEC 2 0 2034
Past Operator's Name and Address ANADARKO ESP COMPANY LP	Phone 832-636-3127 CONSERVATION DIVISION
1201 Lake Robbins Dr. Texas 77380	Date 11/23/2004
Title ENVIRONMENT AND REGULATORY AFFAIRS SUPV	Signature Jun lenkuen
New Operator's License No. 32446	Contact Person: LYNNE MOON
New Operator's Name and Address MERIT ENERGY COMPANY	Phone 972-701-8377
13727 NOEL ROAD SUITE 500	Oil/Gas Purchaser
DALLAS, TEXAS 75240	Date11/29/2004
Title SR. LAND/REGULATORY ADMINISTRATOR	Signature Sugar Moor
Acknowledgment of Transfer: The above request for transfer of inj noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership	pration Commission. This acknowledgement of transfer pertains to Kansas
is acknowledged as the new operator and may continue to inject fluids as authorized by Docket# Recommended action	is acknowledged as the new operator of the above named lease containing the surface pond permitted by #
Date Authorized Signature	Date Authorized Signature



Side Two

Must Be Filled For All Wells

* Lease Name * Location CLAYPOOL D-1-21 21 22 S 35 W NWNW Well Status (PROD/TA'D/Abandoned Footage from Section Line Type of Well (Oil/Gas/INJ/WSW) API No. Well No. (i.e. FSL=Feet from South Line) (YR DRLD/PRE '67) Circle Circle (ole 0 FSL/FNL) FEL/FWI 1509320482 060 PROD -1--21 CAS 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.