

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:

DOR 214912

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

** 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 VICTORYEffective Date of Transfer 12/1/2004Lease Name HUXMAN 11-14_____ - _____ - _____ 14 Sec 30 T 34 R ☐ East ☒ West

Legal Description of Lease: _____

County HASKELLProduction Zone(s) KANSAS CITY

Injection Zone(s) _____

Surface Pond Permit # _____

(API No. If Drill Pit)

Identify: ☐ Emergency Pit☐ Burn Pit☐ Storage Pit☐ Drill Pit

_____ Feet from N / S Line of Section

_____ Feet from E / W Line of Section

RECEIVED

KANSAS CORPORATION COMMISSION

Past Operator's License No. 4549Contact Person: JIM LAFEVERS

DEC 20 2004

Past Operator's Name and Address ANADARKO PETROLEUMPhone 832-636-3127CONSERVATION DIVISION
WICHITA, KS1201 Lake Robbins Dr. Texas 77380Date 11/23/2004Title ENVIRONMENT AND REGULATORY AFFAIRS SUPVSignature [Signature]New Operator's License No. 32446Contact Person: LYNNE MOONNew Operator's Name and Address MERIT ENERGY COMPANYPhone 972-701-837713727 NOEL ROAD SUITE 500Oil/Gas Purchaser NCRADALLAS, TEXAS 75240Date 11/29/2004Title SR. LAND/REGULATORY ADMINISTRATORSignature [Signature]

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

3/4/05 MAR 08 2005 3/7/05

Side Two

Must Be Filled For All Wells

HUXMAN 11-14

*** Location**

[illegible]

*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.