

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 _____☒ 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 SHUCKEffective Date of Transfer 12/1/2004Lease Name NIX K-1 (CHESTER)_____ - _____ - _____ - 33 Sec 33 T 34 R ☐ East ☒ West

Legal Description of Lease: _____

County SEWARDProduction Zone(s) MORROW

Injection Zone(s) _____

Surface Pond Permit # _____

(API No. If Drill Pit)

_____ Feet from N / S Line of Section

_____ Feet from E / W Line of Section

Identify: ☐ Emergency Pit ☐ Burn Pit☐ Storage Pit ☐ Drill PitPast Operator's License No. 4549Contact Person: JIM LAFEVERSPast Operator's Name and Address ANADARKO PETROLEUMPhone 832-636-31271201 Lake Robbins Dr. Texas 77380Date 11/23/2004Title ENVIRONMENT AND REGULATORY AFFAIRS SUPVSignature Jim LafeversNew Operator's License No. 32446Contact Person: LYNNE MOONRECEIVED
KANSAS CORPORATION COMMISSION

DEC 20 2004

New Operator's Name and Address MERIT ENERGY COMPANYPhone 972-701-8377Oil/Gas Purchaser _____ CONSERVATION DIVISION
WICHITA, KS13727 NOEL ROAD SUITE 500Date 11/29/2004DALLAS, TEXAS 75240Title 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 _____

NOV 11/27/05 JAN 31 2005 1-27-05

Must Be Filled For All Wells

* Lease Name

NIX K-1 (CHESTER)

* Location

33 33 S 34 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
)

[illegible]

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.