

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

Check Applicable Boxes:

DOOR 203560

Effective Date of Transfer 12/1/2004☐ Oil Lease: No. of Wells _____Lease Name SINN 1☒ Gas Lease: No. of Wells 1 **____ - ____ - ____ - 33 Sec 25 T 34 R ☐ East ☒ West

** 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 FINNEYEntire project: ☐ Yes ☐ NoProduction Zone(s) CHASE GROUP

Number of injection wells _____

Injection Zone(s) _____

Field Name HUGOTON (KANSAS)

Surface Pond Permit # _____

(API No. If Drill Pit)

____ Feet from N / S Line of Section

____ Feet from E / W Line of Section *APL*Identify: ☐ Emergency Pit☐ Burn Pit☐ Storage Pit☐ Drill PitPast Operator's License No. 6411 3313pContact Person: JIM LAFEVERSPast Operator's Name and Address ANADARKO E&P COMPANY LPPhone 832-636-31271201 Lake Robbins Dr. Texas 77380Date 11/23/2004Title ENVIRONMENT AND REGULATORY AFFAIRS SUPVSignature *Jim Lafevers*New Operator's License No. 32446Contact Person: LYNNE MOONRECEIVED
KANSAS CORPORATION COMMISSIONNew Operator's Name and Address MERIT ENERGY COMPANYPhone 972-701-8377

DEC 20 2004

13727 NOEL ROAD SUITE 500Oil/Gas Purchaser _____ CONSERVATION DIVISION
WICHITA, KSDALLAS, TEXAS 75240Date 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

11/31/05

FEB 01 2005 2/1/05

Must Be Filled For All Wells

* Lease Name

SINN 1

* Location

33 25 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.