RECEIVED JUL 1 2 2010 KCC WICHITA

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1 April 2004 Form must be Typed Form must be Signed All blanks must be Filled

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

Check Applicable Boxes:		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 07/01/2010	
✓ Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: 207230 VIJB Lease Name: RICHARDS GAS UNIT 2	
Gas Gathering System:		
Saltwater Disposal Well - Permit No.:		
Spot Location: 2640 feet from N / S Line	C _ E2 Sec. 12 Twp. 28 R. 40 E V W	
1320 feet from VE / W Line	Legal Description of Lease: E/2 1/2 12-28-40 W	
Enhanced Recovery Project Permit No.:		
Entire Project: Yes No	County: STANTON RECEIVED	
Number of Injection Wells**	Production Zone(s): COUNCIL GROVE GROUP AUG 1 1 20	
Field Name: PANOMA GAS AREA	Injection Zone(s):	
** Side Two Must Be Completed.	KCC WICHI	
Surface Pit Permit No.:	feet from N / S Line of Section	
(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section	
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling	
Past Operator's License No. 32446	Contact Person: Lynne Moon	
ast Operator's Name & Address: Merit Energy Company Phone: 972-628-1569		
13727 Noel Road, Suite 500 Dallas, Texas 75240 RECEIVED	Date: 07/01/2010	
Title: Regulatory Manager AUG 1 8 201) Signature Noon	
New Operator's License No. 34408 KCC WICHIT	Acontact Person: Randall K. Click	
New Operator's Name & Address: Cisco Operating, LLC	Phone: 214-291-9877	
6900 N. Dallas Parkway Suite 740 Plano, Texas 75024	Oil / Gas Purchaser:	
	Date: 07/04/2018	
	Date: United States of the Sta	
Title: President	Signature: U (MULLUX)	
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # has been	
noted, approved and duly recorded in the records of the Kansas Corpora	ation Commission. This acknowledgment of transfer pertains to Kansas	
Corporation Commission records only and does not convey any ownership	interest in the above injection well(s) or pit permit.	
is acknowleged as the	is acknowleged as the	
new operator and may continue to inject fluids as authorized by	new operator of the above named lease containing the surface pit	
Permit No.: Recommended action:	permitted by No.:	
Date:	Date:	
Date: Authorized Signature	Authorized Signature	
DISTRICT EPR	RODUCTION 10/15/10 UIC 10-15-10	
Mail to: Past Operator New Operator	District	

SCANNED

Must Be Filed For All Wells

KDOR Lease No.: 207230 * Lease Name: RICHARDS GAS UNIT 2 * Location: SEC. 12-T28S-R40W Well No. API No. Well Status Footage from Section Line Type of Well (YR DRLD/PRE '67) (i.e. FSL = Feet from South Line) (Oil/Gas/INJ/WSW) (PROD/TA'D/Abandoned) 15-187-20154 🗸 A-2 2640 **PROD** FSL/FNL _ FEL/FWL FSL/FNL FEL/FWL FSL/FNL __ FEL/FWL _ 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 two for each lease. If a lease covers more than one section please indicate which section each well is located.

Kansas Corporation Commission Oil & Gas Conservation Division

Form KSONA-1
July 2010
Form Must Be Typed
Form must be Signed
All blanks must be Filled

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

This form must be submitted with all Forms C-1 (Notice of Intent to Drill); CB-1 (Cathodic Protection Borehole Intent); T-1 (Request for Change of Operator Transfer of Injection or Surface Pit Permit); and CP-1 (Well Plugging Application).

Any such form submitted without an accompanying Form KSONA-1 will be returned.

Select the corresponding form being filed: C-1 (Intent) CB-1 (Cathodic Protection Borehole Intent) X T-1 (Transfer)	CP-1 (Plugging Application)
OPERATOR: License #32446	Well Location:CE2 Sec12 Twp28_S. R40 East \[\begin{align*} \text{\textit{Z}} \text{West} \\ \text{County:} Stanton \end{align*}	
Name:Merit Energy Company		
Address 1: 13727 Noel Rd. Suite 500		
Address 2:	Lease Name: Richards Gas Unit	Well #:2
City:Dallas State:TX Zip:75240+	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:	
Contact Person: <u>Lynne Moon</u> Phone: (972) 628-1569 Fax: (972) 628-1869	RECEIVED RECEIVED	
Email Address:lynne.moon@meritenergy.com	AUG 1 8 2010	AUG 1 1 2010
Surface Owner Information:	KCC WICHITA	KCC WICHITA
Name: Marylin Ruth Living Trust	When filing a Form T-1 involving multiple surface owners, attach an additio	
Address 1: 3050 N. Rd. F	sheet listing all of the information to the left for e owner information can be found in the records of	the register of deeds for the
Address 2:	county, and in the real estate property tax records	of the county treasurer.
City: State: Zip:67855+		
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Catho the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered of Select one of the following:	k batteries, pipelines, and electrical lines. The loc n the Form C-1 plat, Form CB-1 plat, or a separa	cations snown on tne plat te plat may be submitted.
I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be let CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a	ocated: 1) a copy of the Form C-1, Form CB-1, being filed is a Form C-1 or Form CB-1, the plat	Form 1-1, or Form
I have not provided this information to the surface owner(s). I a KCC will be required to send this information to the surface ov task, I acknowledge that I am being charged a \$30.00 handling	vner(s). To mitigate the additional cost of the Ki	oc penorming this
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with 1 will be returned.	1 this form, the KSONA-1
I hereby certify that the statements made herein are true and correct to		
Date: 07/01/2010 Signature of Operator or Agent:	Title: Regulato	ory Manager