RECEIVED

### 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

KCC	W	CH	ITA
KLL	VVI		11/

Check Applicable Boxes:				
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 07/01/2010			
✓ Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 134261/221666			
Gas Gathering System:	Lease Name: SHUCK B-2			
Saltwater Disposal Well - Permit No.:				
Spot Location: 660 feet from N / S Line	CNWSec. 20Twp. 33R. 34EV_W			
_660 feet from E / W Line	Legal Description of Lease: NW140 20-33-34W			
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	SEWARD			
Number of Injection Wells**	Production Zone(s): UPPER CHESTER			
Field Name: SHUCK				
A Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.:	fortherm DN / DO Line of Continu			
(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 RECEIVED			
Past Operator's Name & Address: Merit Energy Company	Phone: 972-628-1569			
13727 Noel Road, Suite 500 Dallas, Texas 75240	Date: 07/01/2010 SEP 0 2 2010			
Title: Regulatory Manager	Signature: KCC WICHITA			
New Operator's License No. 34408	Contact Person: Randall K. Click			
New Operator's Name & Address: Cisco Operating, LLC	Phone: 214-291-9987			
6900 N. Dallas Parkway Suite 740 Plano, Texas 75024				
	Oil / Gas Purchaser:			
	Date: 07/01/2019			
Title: President	Signature: V QULUVAV (SCOOL)			
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:			
Authorized Signature	Authorized Signature			
DISTRICT EPR 10-13-10 P	PRODUCTION $\frac{10/13/10}{10-13-10}$ uic $\frac{10-13-10}{10-13-10}$			
Mail to: Past Operator New Operator	District			



#### Side Two

#### Must Be Filed For All Wells

	e No.: 134261/221666						
* Lease Name	: SHUCK B-2		* Location: SEC. 20-T33S-R34W				
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section (i.e. FSL = Feet from Sou		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)		
B-2	15-175-21597	660 Circle 660	Circle FELITUL	GAS	PROD		
		FSL/FNL	FEL/FWL				
	Market Control of the	FSL/FNL	FEL/FWL				
	·	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		<u></u>		
		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				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
	Act and the second seco	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				

A separate sheet may be attached if necessary

<sup>\*</sup> 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:		
Name: Merit Energy Company	CNWNW_Sec20_Twp33_SR34East 🔀 West		
Address 1: 13727 Noel Rd. Suite 500	County: SEWARD		
Address 2:	Lease Name: SHUCK B-2 Well #: B-2		
City:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: Lynne Moon	the lease heless		
Phone: ( 972 ) 628-1569 Fax: ( 972 ) 628-1869	RECEIVED		
Email Address: lynne.moon@meritenergy.com	SEP 0 2 20		
Surface Owner Information:           Name:         CS SHUCK LLC           Address 1:         RR 1 BOX 159           Address 2:         City:           LIBERAL         State:           KS         Zip:           67901         +	When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.		
the KCC with a plat showing the predicted locations of lease roads, tal	nodic Protection Borehole Intent), you must supply the surface owners and nk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
owner(s) of the land upon which the subject well is or will be 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,	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.  acknowledge that, because I have not provided this information, the		
	owner(s). To mitigate the additional cost of the KCC performing this		
If choosing the second option, submit payment of the \$30.00 handlin form and the associated Form C-1, Form CB-1, Form T-1, or Form CF	g fee with this form. If the fee is not received with this form, the KSONA-1 2-1 will be returned.		
I hereby certify that the statements made herein are true and correct to			
Date: 07/01/2010 Signature of Operator or Agent	Moon Title: Regulatory Manager		