KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

KCC WICHITA

Form 1-1 March 2010 Form must be Typed Form must be Signed All blanks must be Filled

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

JUN 28 2013

Form KSONA - 1, Certification of Compliance With the Kansas Surface Owner Notification Act, MUST be submitted with this form.

RECEIVED

Check Applicable Boxes:	
Oil Lease: No. of Oil Wells	Effective Date of Transfer: April 1st 2013
☑ Gas Lease: No. of Gas Wells 1 **	VS Doot of Flournus Lance Na
Gas Gathering System:	KS Dept of Revenue Lease No.: 200436
Saltwater Disposal Well - Permit No.:	Lease Name: BAKER
Spot Location: feet from N / S Line	Sec 3 Twp 35 R. 35 口E図W
feet from ☐ E / ☐ W Line	Legal Description of Lease:
☐ Enhanced Recovery Project Permit No.:	T 35S R 35W Sec 3 NW 6TH PRINCIPAL 1855
Entire Project: Yes No	County: STEVENS
Number of Injection Wells **	
Field Name: KANSAS HUGOTON	
	Injection Zone(s):
Surface Pit Permit No.: N/A (API No. If Drill Pit, WO or Haul)	feet from N/ S Line of Selection
VIIII II JIII II, WOO Haay	feet from N/ S Line of Selection
Type of Pit: Emergency Burn Settling	Haul-Off
Past Operator's License No. 4549 🛩	Contact Person: Frank Davis
Past Operator's Name & Address: Anadarko Petroleum Corporation	Phone: 832-636-3130
P O Box 1330, Houston, TX 77251	Date: 06/13/2013
Title: Regulatory Affairs Mgr.	Signature: Frank a. Daws
	Frank a. Navs H.
New Operator's License No. 33136	Contact Person: Frank Davis
New Operator's Name & Address: Anadarko E&P Onshore LLC	Phone: 832-636-3507
P O Box 1330, Houston, TX 77251	Oil / Gas Purchaser: OMSGS
	Date: 06/13/2013
Title: Regulatory Affairs Mgr.	Signature: Frank a. Daws
	A ramp U. Vau
Acknowledgment of Transfer: The above request for transfer of injection authorization, surface	
noted, approved and duly recorded in the records of the Kansas Corporation Commission. This Commission records only and does not convey any ownership interest in the above injection w	
is acknowledged as	is acknowledged as
the new operator and may continue to inject fluids as authorized by	the 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 8/26/13 PR	RODUCTION 8.27.13 UIC 8-27-13
Mail to: Past Operator New Operator	
New Operator	District

Must Be Filled For All Wells

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KDOR Lease No.:	200436		JUN 2 8 2013			
*Lease Name.:	BAKER		*Location.:	RECEIVED	3,35S,35W	
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section (i.e. FSL = Feet from Soc	Line uth Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
1-3	1518900688	1304 FNL 1292	P FWL	GAS	PR	
		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			
12 Mar.		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			

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:	intent) CB-1	(Cathodic Protection Borehole Intent)	▼ T-1 (Transfer)	CP-1 (Plugging Application)			
OPERATOR: License # 33136 Name: Anadarko E&P Onshore LLC		Well Location:					
Address 1: P.O BOX 1330		S	ec <u>3</u> Twp <u>35</u>	R. 35 East X West			
Address 2:		County: STEVENS					
City: Houston State: TX Zip: 77251	- 1330	Lease Name: BAKER Well #: 1-3					
Contact Person: Frank Davis	- 1300	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:					
Phone: (832) 636 - 3130 Fax: ()	_					
Email Address: frank.davis@anadarko.com		_ _					
Surface Owner Information: Name: BAKER, IRENE VICKERS TEST TR NO 1		Mg gu =					
Address 1: % US TRUST BANK OF AMERICA		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.					
Address 2: 8101 SW 34TH AVE							
City: AMARILLO State: TX Zip: 79121-	1069						
If this form is being submitted with the Form C-1 (Intent) or CB-1 (Capital showing the predicted locations of lease roads, tank batteries, estimates. The locations may be entered on the Form C-1 plat, For Select one of the following:	pipelines, and electrica	lines. The locations shown on the	surface owners and the i	KCC with a n-binding			
I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the this form; and 3) my operator name, address, phone number 1.	be located: 1) a copy of form being filed is a For per, fax, and email addr	the Form C-1, Form CB-1, Form T m C-1 or Form CB-1, the plat(s) re ess.	Γ-1, or Form quired by				
☐ I have not provided this information to the suurface owner the KCC will be required to send this information to the su this task, I acknowledge that I am being charged \$30.00 h	rface owner(s). To mitig	ate the additional cost of the KCC	performing				
of choosing the second option, submit payment of the \$30.00 handli cassociated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be n	ng fee with this form. If etruned.	the fee is not received with this for	m, the KSONA-1 form ar	nd the			
hereby certify that the statements made herein are true and correct	to the best of my know	ledge and beleif.					
Date: 06/13/2013 Signature of Operator or Agent:	Frank	"a. Davis Titl	e: Regulatory Affairs Mo	gr.			

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JUN 28 2013

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