KCC WICHITA

JUN 28 2013

KANSAS CORPORATION COMMISSION **OIL & GAS CONSERVATION DIVISION**

Form T-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 **RECEIVED**

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

Check Applicable Boxes:	
☐ Oil Lease: No. of Oil Wells **	Effective Date of Transfer: April 1st 2013
☑ Gas Lease: No. of Gas Wells 1 ***	KS Dept of Revenue Lease No.: 200995
Gas Gathering System:	NS Dept of Revenue Lease No 200995
Saltwater Disposal Well - Permit No.:	Lease Name: DAVIS
Spot Location: feet from N/ S Line feet from E/ W Wine	Sec3 Twp33 R41 E ⊠W
Enhanced Recovery Project Permit No.:	Legal Description of Lease:
Entire Project: Yes No	T 33S R 41W Sec 3 SE 6TH PRINCIPAL 1855
Number of Injection Wells	County: MORTON
Field Name: KANSAS HUGOTON	Production Zone(s): CHASE
	Injection Zone(s):
Surface Pit Permit No.: N/A (API No. if Drill Pit, WO or Haul)	feet from N/ S Line of Selection
<i>(</i>	feet from N/ S Line of Selection
Type of Pit:	☐ Haul-Off ☐ Workover 0p ☐ Drilling
Past Operator's License No. 4549/	Contact Person: Frank Davis Contact Person: Frank Davis Contact Person: Frank Davis Contact Person: 832-636-3130
Past Operator's Name & Address: Anadarko Petroleum Corporation	1 Hone. 662-666-6166
P O Box 1330, Houston, TX 77251	Date: 06/13/2013 CL
Fitle: Regulatory Affairs Mgr.	Signature: Frank a. Davis
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: ANADP
	Date: 06/13/2013
Fitle: Regulatory Affairs Mgr.	Signature: Frank a. Daws
Acknowledgment of Transfer: The above request for transfer of injection authorization, surfa- noted, approved and duly recorded in the records of the Kansas Corporation Commission. The Commission records only and does not convey any ownership interest in the above injection of	nis acknowledgment of transfer pertains to Kansas Corporation
is acknowledged as	is acknowledged as
he 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 9/10/13 P	PRODUCTION 9.11.13 UIC 9-[1-3
Mail to: Past Operator New Operator	District

Side Two

Must Be Filled For All Wells

KCC WICHIT

KDOR Lease No.:	200995	V				JUN 2 8 201	3
*Lease Name.:	DAVIS				Location.:	RECEIVED33S,41W	
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section (i.e. FSL = Feet from Sou			e _ine)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1-3	1512900317	1338	FSL	1255	FEL	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 _	***	
			FSL/FNL _		FEL/FWL		
			FSL/FNL		FEL/FWL _		

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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.

MCC MICHIA JUN 28 2013

RECEIVED

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

KCC WICHITA JUN 28 2013

July 2010 Form must be Typed Form must be Signed All blanks must be Filled

Form KSONA-1

RECEIVED

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 # 33136 Name: Anadarko E&P Onshore LLC	Well Location: Sec 3 Twp 33 R 41 □ Fast ⊠ West				
Address 1: P.O BOX 1330					
Address 2:	County: MORTON				
City: Houston State: TX Zip: 77251 - 1330	Lease Name: DAVIS Well #: 1-3				
Contact Person: Frank Davis	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: DAVIS FAMILY TRUST	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				
Address 1: PO BOX 487					
Address 2:	county, and in the real estate property tax records of the county treasurer.				
City: RICHFIELD State: KS Zip: 67953					
If this form is being submitted with the Form C-1 (Intent) or CB-1 (Cathodic Protection Bore plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical estimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate of the following:	lines. The locations shown on the plat are preliminary non-binding ate plat may be submitted. I have provided the following to the surface				
CP-1 that I am filing in connection with this form; 2) if the form being filed is a Forn this form; and 3) my operator name, address, phone number, fax, and email address.	m C-1 or Form CB-1, the plat(s) required by				
I have not provided this information to the suurface owner(s). I acknowledge that, the KCC will be required to send this information to the surface owner(s). To mitig this task, I acknowledge that I am being charged \$30.00 handling fee, payable to	ate the additional cost of the KCC performing				
f choosing the second option, submit payment of the \$30.00 handling fee with this form. If t essociated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be retruned.	he fee is not received with this form, the KSONA-1 form and the				
hereby certify that the statements made herein are true and correct to the best of my knowledge.	edge and beleif.				
pate: 06/13/2013 Signature of Operator or Agent:	7 G. Davis Title: Regulatory Affairs Mgr.				