KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

KCC WICHITA

March 2010
Form must be Typed
Form must be Signed

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

JUN 28 2013

Authorized Signature

District

Form KSONA - 1, Certification of Compliance With the Kansas Surface Owner Notification Act, RECEIVED Check Applicable Boxes: ☐ Oil Lease: No. of Oil Wells Effective Date of Transfer: April 1st 2013 X Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No .: 215575 ☐ Gas Gathering System: ☐ Saltwater Disposal Well - Permit No.: Lease Name: MCCARTY A Spot Location: feet from □ N/ □ S Line 40 □ E ⊠W feet from ☐ E/ ☐ W Line Legal Description of Lease: ☐ Enhanced Recovery Project Permit No.: T 34S R 40W Sec 1 SW 6TH PRINCIPAL 1855 Entire Project: Yes No County: MORTON Number of Injection Wells Production Zone(s): CHASE Field Name: KANSAS HUGOTON Injection Zone(s): 040113 Mtcarty. Surface Pit Permit No .: N/A feet from □ N / □ S Line of Selection (API No. if Drill Pit, WO or Haul) feet from □ E / □ W Line of Selection Type of Pit: ☐ Emergency ☐ Burn ☐ Settling ☐ Haul-Off ☐ Workover □ Drilling Past Operator's License No. 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 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 Title: Regulatory Affairs Mgr. Signature: Frank a. Davis Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit # noted, approved and duly recorded in the records of the Kansas Corporation 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 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.:

New Operator

PRODUCTION

Authorized Signature

Date:

DISTRICT

Mail to: Past Operator

Must Be Filled For All Wells

KCC WICHITA

KDOR Lease No.:	215575						
*Lease Name.:	MOCARTY				JUN 28 2013		
	MCCARTY A			<u> </u>	*Location.:	RECEIVED	1,34S,40W
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section L (i.e. FSL = Feet from South			ne Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1H	1512920916	1178	FSL	1260	FWL	GAS	DR
			FSL/FNL		_ FEL/FWL		
			FSL/FNL		FEL/FWL		
		_	FSL/FNL		FEL/FWL		
			FSL/FNL		FEL/FWL		
	-		FSL/FNL				
			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		
			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

KCC WICHITA

JUN 28 2013

Form KSONA-1
July 2010
Form must be Typed
Form must be Signed

CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

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)	athodic Protection Borehole Intent)				▼ T-1 (Transfer)			CP-1 (Plugging Application)					
<u></u>	3136				Well Loca	ation:										
Name: Anadarko E&P Onsh	ore LLC			·· · · · · · · · · · · · · · · · · · ·		<u>·</u>		Sec	1	Twp	34	_R.	40] East	West	
Address 1: P.O BOX 1330					County:	MOR	TON									
Address 2:					Lease Na	ame:	MCCA	RTY A					Well #:	1H		
City: Houston State: TX Zip: 77251 - 1330						If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:										
Contact Person: Frank Davi	S				the lease	below	<i>r</i> :									
Phone: (832) 636 - 3130		Fax:	()		_											
Email Address: frank.davis@)anadarko.com				-											
Surface Owner Information: Name: MCCARTY, RUTH (H	ILE) & WHITMOYE	R, ROBE	RT & PATSY		When filing	a Forn	n T-1 in	volving i	multiple	surface	owner	s, atta	ach an ac	ditiona		
Address 1: 2561 EARL ST					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 2:					county, and	in the	real est	ate prop	oerty ta:	x record	s of the	cour	nty treasu	rer.		
City: WOOSTER	State: OH	Zip: -	44691		-											
If this form is being submitted of plat showing the predicted local estimates. The locations may be	ations of lease roads	, tank ba	tteries, pipeline:	s, and electrical	lines. The local	ations .	shown d	y the su on the p	rface ov lat are p	wners ar orelimina	nd the l ry non-	KCC ı -bindi	with a ing			
Select one of the following:																
I certify that, pursuar owner(s) of the land CP-1 that I am filing this form; and 3) my	upon which the subje in connection with th	ect well is is form; 2	s or will be locat 2) if the form bei	ed: 1) a copy of ng filed is a For	the Form C-1, n C-1 or Form	Form	CB-1, F	orm T-1	, or For	m						
☐ I have not provided the KCC will be requithis task, I acknowled	ired to send this infor	rmation t	o the surface ov	vner(s). To mitig	ate the addition	nal cos	st of the	KCC pe	erformin	n, Ig						
f choosing the second option, associated Form C-1, Form CE	submit payment of th 3-1, Form T-1, or For	ne \$30.00 m CP-1	0 handling fee w will be retruned.	vith this form. If	the fee is not re	eceive	d with th	nis form,	the KS	SONA-1	form ar	nd the	•			
hereby certify that the statement	ents made herein are	true and	d correct to the b	est of my know	edge and bele	if.										
Date: 06/13/2013	Signature of Opera	tor or Ag	ent:	Frank	a. Dav	နှ		Title:	Regul	atory Afi	airs Mo	gr.				