# KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

KCC WICHITA

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

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 **	KS Dept of Revenue Lease No.: 206314
Gas Gathering System:	
Saltwater Disposal Well - Permit No.:	Lease Name: DEMUTH A
Spot Location: feet from N / S Line	Sec <u>33</u> Twp <u>33</u> R. <u>38</u> ☐ E ⊠ W
feet from ☐ E / ☐ W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T 33S R 38W Sec 33 NW 6TH PRINCIPAL 1855
Entire Project: Yes No	County: STEVENS
Number of Injection Wells	Production Zone(s): COUNCIL GROVE
Field Name: PANOMA	Injection Zone(s):
**************************************	
Surface Pit Permit No.: N/A	feet from □ N / □ S Line of Selection ∴
Surface Pit Permit No.: N/A  (API No. if Drill Pit, WO or Haul)	
	feet from E / W Line of Selection
Type of Pit: Emergency Burn Settling	□ Haul-Off □ Workover O P □ Drilling
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	Phone: 832-636-3130  Date: 06/13/2013
Title: 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
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, surfaction 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	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 F	PRODUCTION NOV 1 5 2013 UIC NOV 1 5 2013
Mail to: Past Operator New Operator	District

Side Two

#### Must Be Filled For All Wells

### KCC WICHITA

KDOR Lease No.:	206314	<u> </u>					
*Lease Name.:	DEMUTH A				*Location.:	JUN 28 2013	33,33S,38W
	Ballio III./X				-	RECEIVED	00,000,000
Well No.	API No. (YR DRLD/PRE '67)		tage from S SL = Feet from			Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	1518920234 - <b>60-01</b>	200	FNL	1230	FWL .	GAS	PR
		f	FSL/FNL _		FEL/FWL		
		F	FSL/FNL _		FEL/FWL -		
		F	FSL/FNL _		FEL/FWL		
		F	FSL/FNL _		FEL/FWL -		
		F	FSL/FNL _		FEL/FWL		
		F	FSL/FNL _		FEL/FWL		
		F	FSL/FNL _		FEL/FWL -		
		F	SL/FNL _		FEL/FWL -		
		F	SL/FNL _		FEL/FWL -		
		F	FSL/FNL _		FEL/FWL -	* 1911111	-
		F	SL/FNL _		FEL/FWL -		
		F	FSL/FNL _		FEL/FWL		
		F	FSL/FNL _		FEL/FWL _		
		F	SL/FNL _		FEL/FWL _		_
		F	SL/FNL _		FEL/FWL _		
		F	SL/FNL		FEL/FWL		
		F	SL/FNL		FEL/FWL		
		F	SL/FNL _		FEL/FWL		
		F	SL/FNL _		FEL/FWL		
		F	SL/FNL _		FEL/FWL		
		F	SL/FNL _		FEL/FWL		
		F	SL/FNL _		FEL/FWL _		
		F	SL/FNL		FEL/FWL _		
		F	SL/FNL _		FEL/FWL _		
		F	SL/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 (Ca	thodic Protection Borehole Intent) 🔀 T-1 (Transfer) 🗀 CP-1 (Plugging Application)			
OPERATOR: License # 33136           Name: Anadarko E&P Onshore LLC           Address 1: P.O BOX 1330           Address 2:           City: Houston State: TX Zip: 77251 - 1330           Contact Person: Frank Davis           Phone: (832) 636 - 3130 Fax: ( )           Email Address: frank.davis@anadarko.com	Well Location:  Sec 33 Twp 33 R 38 ☐ East ☑ West  County: STEVENS  Lease Name: DEMUTH A Well #: 1  If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Surface Owner Information:  Name: BEGLEY, JAMES R & JUDITH R TR TTEES  Address 1: PO BOX 72  Address 2:  City: ATWOOD State: KS Zip: 67730-0072  If this form is being submitted with the Form C-1 (Intent) or CB-1 (Cathodic Protection Borel plat showing the predicted locations of lease roads, tank batteries, pipelines, and electrical lestimates. The locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separa	ines. The locations shown on the plat are preliminary non-binding			
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice Act (House Bill 2032), owner(s) of the land upon which the subject well is or will be located: 1) a copy of t CP-1 that I am filing in connection with this form; 2) if the form being filed is a Form this form; and 3) my operator name, address, phone number, fax, and email addre  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 mitigate this task, I acknowledge that I am being charged \$30.00 handling fee, payable to the	the Form C-1, Form CB-1, Form T-1, or Form JUN 28 2013  n C-1 or Form CB-1, the plat(s) required by ss.  RECEIVED  Decause I have not provided this information, ate the additional cost of the KCC performing			
If choosing the second option, submit payment of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 will be retruned.				
I hereby certify that the statements made herein are true and correct to the best of my knowled Date: 06/13/2013 Signature of Operator or Agent:	Title: Regulatory Affairs Mgr.			