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MAY 30 2014
KCC WICHITA

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 OR SURFACE PIT PERMIT

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

Crieck Applicable Boxes.			
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: May 1, 2014		
Gas Lease: No. of Gas Wells 1	KS Dept of Revenue Lease No.: 217016		
Gas Gathering System:	Lease Name: Kennedy 'C' 3		
Saltwater Disposal Well- Permit No.:			
Spot Location:feet from N / S Linefeet from E / W Line	Legal Description of Lease: T29S R36W, Sec. 10, NW NW NE SE		
Enhanced Recovery Project Permit No.:	_		
Entire Project: Yes No	County: Grant		
Number of Injection Wells***	Production Zone(s): Chase Group		
Field Name: HUGOTON GAS AREA	- Injection Zone(s):		
** Side Two Must Be Completed.			
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet fromN /S Line of Section		
(API No. if Drill Pit, WO or Haul)	feet fromE /W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling		
Past Operator's License No. 5447	Contact Person: Brent G. Sonnier		
Past Operator's Name & Address: OXY USA Inc	Phone: 713.366.5654		
5 Greenway Plaza, Suite 110, Houston, TX 77046	Date: April 15, 2014		
	Signature: Brent Amnin		
Title: Regulatory Manager	- TOTAL STORTE		
New Operator's License No. 32446	_		
New Operator's Name & Address: Merit Energy Company, LLC	Contact Person: Arlene Valliquette		
13727 Noel Rd., Ste. 1200, Dallas, TX 75240	Phone: 972.628.1558		
25/27/100/144, 510/2409/50/145, 77/52/10	Oil/Gas Purchaser: Occidental Energy Marketing Inc		
	Date: April 15, 2014		
Title: Regulatory Manager	Signature:		
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been		
2	on Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the			
Commission records only and does not convey any ownership interest in the	above injection wents, or pit permit.		
Merit Energy Company, LLC is acknowledged as	Merit Energy Company, LLCis 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.:		
Vilene Vallimette	alesce Valligantte		
Date: April 15, 2014	Date: April 15, 2014		
Authorized Signature	Authorized Signature		
**	RODUCTION SEP 2 9 2014 UIC SEP 2 9 2014		
Mail to: Past OperatorNew Operator_	District		

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217116

Must Be Filed For All Wells

KDOR L	ease No.: 21	7016		
*Lease N	ame: <u>Kennedy 'C' 3</u>	*Location:_T29S F	36W, Sec. 10, NW NW	NE SE
Well No.	API No. (YR DRLD/PRE "67)	Footage from Section Line (i.e. FSL= Feet from South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
3+	15-067-20776	FS'L FEL 2340 North, 1250 West, from SE corner	GAS	Producing

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.

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Form KSONA-1 January 2014 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, LLC	County: Grant			
Address 1:13727 Noel Rd., Ste. 1200	Lease Name: Kennedy 'C' 3			
City: Dallas State: TX Zip:75240	If filing a Form T-1 for multiple wells on a lease, enter the legal description of			
Contact Person: Arlene Valliquette	the lease below: T29S R36W, Sec. 10, NW NW NE SE			
Phone: (972) 628-1558 Fax: (972) 628-1856				
Email Address: Arlene.Valliquette@meritenergy.com				
Surface Owner Information:				
MCARTHUR, DONALD F ETAL	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			
ATTN: WENCEL, LINDA	owner information can be found in the records of the register of deeds for the			
431 W 28TH AVE	county, and in the real estate property tax records of the county treasurer.			
the KCC with a plat showing the predicted locations o	nt) or CB-1 (Cathodic Protection Borehole Intent), you must supply the surface owners and flease roads, tank batteries, pipelines, and electrical lines. The locations shown on the plat may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
Select one of the following:				
owner(s) of the land upon which the subject	e Owner Notice Act (House Bill 2032), I have provided the following to the surface well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form rm; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this ne number, fax, and email address.			
KCC will be required to send this information task, I acknowledge that I must provide the name of the provide the	face owner(s). I acknowledge that, because I have not provided this information, the to the surface owner(s). To mitigate the additional cost of the KCC performing this ame and address of the surface owner by filling out the top section of this form and e, payable to the KCC, which is enclosed with this form.			
If choosing the second option, submit payment of the form and the associated Form C-1, Form CB-1, Form	\$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 T-1, or Form CP-1 will be returned.			
hereby certify that the statements made herein are tro	ue and correct to the best of my knowledge and belief.			
Pate April 15, 2014 Signature of Operator or Agent	Chlerie Vallignette Title: Regulatory Manager			