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,
MIST be submitted with this form

Check Applicable Boxes:	MOST be sub	omitted with this form.	
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.: 215816	
Gas Gathering System:		Lease Name: RAHENKAMP 'A' 2	
Saltwater Disposal Well- Permit No.:		Lease Name. IVAIILINIVAINIF A Z	
Spot Location:feet from N /	S Line		
feet from E /	W Line	Legal Description of Lease: T29S R34W, Sec. 3, NE SE	
Enhanced Recovery Project Permit No.:		_	
Entire Project: Yes No		County: Haskell	
Number of Injection Wells**		Production Zone(s): Not shown.	
Field Name: HUGOTON GAS AREA		- Injection Zone(s):	
** Side Two Must Be Completed.			
Surface Pit Permit No.:		feet from N / S Line of Section	
Surface Pit Permit No.:(API No. if Drill Pit, WO or Ha	ul)	feet from E / 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		THE CONTRACTOR OF THE CONTRACT	
5 Greenway Plaza, Suite 110, Houston, TX 77046			
		Date: April 15, 2014 Signature:	
Title: Regulatory Manager		Signature: Brent Sannur	
New Operator's License No. 32446			
New Operator's Name & Address: Merit Energy Company, LLC		Contact Person: Arlene Valliquette	
	puriff des	Phone: 972.628.1558	
13727 Noel Rd., Ste. 1200, Dallas, TX 75240		Oil/Gas Purchaser: Occidental Energy Marketing Inc	
		Date: April 15, 2014	
Title: Regulatory Manager		Chlene Valliantte	
		Signature:	
Acknowledgment of Transfer: The above request for transfer.			
noted, approved and duly recorded in the records of the Ka	ansas Corporatio	on Commission. This acknowledgment of transfer pertains to Kansas Corporation	
Commission records only and does not convey any ownersh	nip interest in the	above injection well(s) or pit permit.	
Merit Energy Company, LLCis ack	nowledged as	Merit Energy Company, LLCis acknowledged as	
	54.9		
the new operator and may continue to inject fluids as a	authorized by	the new operator of the above named lease containing the surface pit	
Permit No.: Recommended action:	The second secon	permitted by No.:	
Welesse Valligenette	5_	alesce Villiantte	
Date: April 15, 2014		Date: April 15, 2014 Authorized Signature	
Authorized Signature	-1KL	SCD 3 0 20M	
DISTRICTEPR9-29	PR New Operator	RODUCTION UIC SEP 3 0 2014	
Mail to: Past Operator	INCW OPERATOR_	District	

Side Two

Must Be Filed For All Wells

KDOR L	ease No.:	2,15816		
*Lease N	ame: RAHENKAMP 'A' 2	*Location:_T29S	R34W, Sec. 3, 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)
1	15-081-20467-0001	1980 North, 510 West, from SE corner	GAS	Producing

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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	g form being filed: C-1 (ntent) CB-1 (Cathodic Protection Borehole Intent) X 7	-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 324	46	Well Location:			
Name: Merit Energy Company, LLC		County: <u>Haskell</u>	County: Haskell		
Address 1:13727 Noel Rd.,	Ste. 1200	Lease Name: RAHENKAMP '	A' 2		
City: Dallas	State: <u>TX</u> Zip: <u>75240</u>		If filing a Form T-1 for multiple wells on a lease, enter the legal description		
Contact Person: Arlene Valli	quette	the lease below: T29S R34W, Sec. 3, NE SE	the lease below:		
Phone: (972) 628-1558	Fax: (972) 628-1858	1233 13447, 300. 3, 112 32			
Email Address: Arlene.Valli	quette@meritenergy.com				
Surface Owner Information	ı:	When filing a Form T-1 involving n	nultinle surface owners attach an additional		
Leona D. Logan Family Pa	nrtnership	sheet listing all of the information	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		
644 Crestone Ave.			the records of the register of deeds for the rty tax records of the county treasurer.		
Salida, CO 81201			100		
he KCC with a plat showing preliminary non-binding Select one of the following: I certify that, pure owner(s) of the la CP-1 that I am filing	ng the predicted locations of less estimates. The locations may want to the Kansas Surface and upon which the subject weng in connection with this form	or CB-1 (Cathodic Protection Borehole Intent), you ase roads, tank batteries, pipelines, and electrical be entered on the Form C-1 plat, Form CB-1 plat, or Dwner Notice Act (House Bill 2032), I have provide it is or will be located: 1) a copy of the Form C-1, ; 2) if the form being filed is a Form C-1 or Form C number, fax, and email address.	lines. The locations shown on the plater a separate plat may be submitted. I ded the following to the surface Form CB-1, Form T-1, or Form		
KCC will be requi	red to send this information to ge that I must provide the nar	the owner(s). I acknowledge that, because I have not the surface owner(s). To mitigate the additional of the and address of the surface owner by filling out by ayable to the KCC, which is enclosed with this form	cost of the KCC performing this the top section of this form and		
If choosing the second op form and the associated F	tion, submit payment of the \$ form C-1, Form CB-1, Form T-	20.00 handling fee with this form. If the fee is not r I, or Form CP-1 will be returned.	eceived with this form, the KSONA-1		
I hereby certify that the sta	atements made herein are true	and correct to the best of my knowledge and belie	f.		
Date: April 15, 2014	Signature of Operator or Agent	alesse Valliganette Title	Regulatory Manager		