## 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.

Check Applicable Boxes:  Oil Lease: No. of Oil Wells	Effective Date of Transfer: May 1, 2014	
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.:	
Gas Gathering System:	Lease Name: WINTER 14-N8-30-33	
Saltwater Disposal Well- Permit No.:	Lease Name. Winter 14-No-30-33	
Spot Location:feet from N / S Linefeet from E / W Line Enhanced Recovery Project Permit No.:	Legal Description of Lease: T30S R33W, Sec. 8, NW SE SW	
Entire Project: Yes No	County Hackall	
Number of Injection Wells **	County: Haskell	
-	Production Zone(s): <u>Marmaton</u>	
Field Name: VICTORY  ** Side Two Must Be Completed	Injection Zone(s):	
** Side Two Must Be Completed.  Surface Pit Permit No.:  (API No. if Drill Pit, WO or Haul)  Type of Pit:  Emergency  Burn  Settling	feet from N / S Line of Sectionfeet from E / W Line of Sectionfeet from Drilling K+	
Past Operator's License No. 5447		
	Ti de la companya de	
Past Operator's Name & Address: OXY USA Inc	Phone: 713.366.5654	
5 Greenway Plaza, Suite 110, Houston, TX 77046	Date: April 15, 2014	
Title: Regulatory Manager	Signature: Brunt Shanin	
New Operator's License No. 32446  New Operator's Name & Address: Merit Energy Company, LLC  13727 Noel Rd., Ste. 1200, Dallas, TX 75240	Contact Person: Arlene Valliquette  Phone: 972.628.1558  Oil/Gas Purchaser: Occidental Energy Marketing Inc	
Title: Regulatory Manager	Signature: Ulusu Valliquette	
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit.#has been	
noted, approved and duly recorded in the records of the Kansas Corporatio  Commission records only and does not convey any ownership interest in the	on Commission. This acknowledgment of transfer pertains to Kansas Corporation above injection well(s) or pit permit.	
lerit Energy Company, LLC is acknowledged as	Merit Energy Company, LLC is acknowledged as	
ne new operator and may continue to inject fluids as authorized by	the new operator of the above named lease containing the surface pit	
ermit No.: Recommended action:	permitted by No.:	
ate: April 15, 2014  Authorized Signature	Date: April 15, 2014  Authorized Signature	
DISTRICTEPR10-8-14PF	RODUCTION OCT 0 9 2014 UIC OCT 0 9 2014	
Mail to: Past OperatorNew Operator		

### Side Two

### Must Be Filed For All Wells

KDOR L	ease No.:	138271		,
*Lease N	ame: <u>WINTER 14-N8-30</u> -	33 *Location: <u>T30S F</u>	R33W, Sec. 8, NW SE S	<u>w</u>
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	15-081-21678-0002	673 Neith 1953 Feat from SW comer	Oil	Producina

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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 correspor	nding form being filed: C-1 (Inf	tent) CB-1 (Cathodic Protection Borehole In	ntent) X T-1 (Transfer) CP-1 (Plugging Application)	
OPERATOR: License #	32446	Well Location:		
Name: Merit Energy Co	ompany, LLC	County: <u>Haskell</u>	County: Haskell	
Address 1:13727 Noel I	Rd., Ste. 1200	Lease Name: WINT	ER 14-N8-30-33	
City: <u>Dallas</u>	State: <u>TX</u> Zip: <u>75240</u>	If filing a Form T-1 for	If filing a Form T-1 for multiple wells on a lease, enter the legal description	
Contact Person: Arlene Valliquette			the lease below: T30S R33W, Sec. 8, NW SE SW	
Phone: (972) 628-1558	Fax: (972) 628-1858		5, 1444 SL 344	
Email Address: <u>Arlene</u>	.Valliquette@meritenergy.com			
Surface Owner Inform Larry & Marilyn Winte P.O. Box 294 Sublette, KS 67877		sheet listing all of the owner information can	1 involving multiple surface owners, attach an additional information to the left for each surface owner. Surface be found in the records of the register of deeds for the estate property tax records of the county treasurer.	
re preliminary non-bir		be entered on the Form C-1 plat, Form	CB-1 plat, or a separate plat may be submitted.	
■ I certify that, owner(s) of the CP-1 that I are form; and 3) r □ I have not provided the CC will be task, I acknowledge.	pursuant to the Kansas Surface Content and upon which the subject we may operator name, address, phone povided this information to the surfact required to send this information to wledge that I must provide the name	Il is or will be located: 1) a copy of the ; 2) if the form being filed is a Form C-number, fax, and email address.  The owner(s). I acknowledge that, because the surface owner(s). To mitigate the	have provided the following to the surface e Form C-1, Form CB-1, Form T-1, or Form 1 or Form CB-1, the plat(s) required by this use I have not provided this information, the e additional cost of the KCC performing this by filling out the top section of this form and with this form.	
	nd option, submit payment of the \$3 ted Form C-1, Form CB-1, Form T-1		e fee is not received with this form, the KSONA-1	
I hereby certify that the	ne statements made herein are true	and correct to the best of my knowled	ge and belief.	
Date:Anril 15, 2014	Signature of Operator or Agent:	alexe Vallignette	Title: Regulatory Manager	

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1
January 2014
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# 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) C	CB-1 (Cathodic Protection Borehole Intent)  T-1 (Transfer)  CP-1 (Plugging Application)	
OPERATOR: License # 32446	Well Location:	
Name: Merit Energy Company, LLC	County: Haskell	
Address 1:13727 Noel Rd., Ste. 1200	Lease Name: WINTER 14-N8-30-33	
City: Dallas State: TX Zip:75240	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:	
Contact Person: Arlene Valliquette		
Phone: (972) 628-1558 Fax: (972) 628-1858	T30S R33W, Sec. 8, NW SE SW	
Email Address: Arlene.Valliquette@meritenergy.com	<del></del>	
Surface Owner Information:	When filing a Form T-1 involving multiple surface owners, attach an additional	
Dennis L. Black	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	
769 Highway 56 Satanta, KS 67870	county, and in the real estate property tax records of the county treasurer.	
Select one of the following:	d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.	
owner(s) of the land upon which the subject well is or will	tice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address.	
KCC will be required to send this information to the surfa-	s). I acknowledge that, because I have not provided this information, the ce owner(s). To mitigate the additional cost of the KCC performing this dress of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.	
If choosing the second option, submit payment of the \$30.00 hand form and the associated Form C-1, Form CB-1, Form T-1, or Form	dling fee with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned.	
I hereby certify that the statements made herein are true and corre	ect to the best of my knowledge and belief.	
Date: April 15, 2014 Signature of Operator or Agent:	Wallignatte Title: Regulatory Manager	