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:		moor be subin	ated Will Gill Torrin		
Oil Lease: No. of Oil Wells	S	**	Effective Date of Transfer: May 1, 20	014	
Gas Lease: No. of Gas W	/ells1	**	KS Dept of Revenue Lease No.:	225229	
Gas Gathering System:_			Lease Name: HUDKINS 'A' 2		
Saltwater Disposal Well- F	Permit No.:				
Spot Location:	feet from	N / S Line		OSIN Con 24 CE CE NIM NE	
	feet from	E / W Line	Legal Description of Lease: T34S R	RECEIVED	
Enhanced Recovery Proje	ect Permit No.:			KANSAS CORPORATION COMMISSION	
Entire Project: Yes	No		County: Stevens	11AV 1 C 201h	
Number of Injection Wells		**	Production Zone(s): HUGOTON	MAY 1 6 2014	
Field Name: HUGOTON GAS	AREA		Injection Zone(s):	CONSERVATION DIVISION WICHITA, KS	
	o Must Be Compl	eted.			
				N / S Line of Section	
Surface Pit Permit No.:	(API No. if Drill Pit, V	/O or Haul)	feet from	E / W Line of Section	
Type of Pit: Emergence		Settling	Haul-Off Workover	Drilling K#	
	/		On that Dawner, Brank C. Connier		
Past Operator's License No. 5	447*	44.4	Contact Person: Brent G. Sonnier		
Past Operator's Name & Addre	ess: OXY USA Inc		Phone: 713.366.5654		
5 Greenway Plaza, Suite 110	, Houston, TX 77046		Date: April 15, 2014		
Title: Regulatory Manager			Signature: Brent & Amorio	7	
New Operator's Name & Ad 13727 Noel Rd., Ste. 1200, Dallas Title: Regulatory Manager		y Company, LLC	Contact Person: Arlene Valliquette Phone: 972.628,1558 Oil/Gas Purchaser: Occidental Ene Date: April 15, 2014 Signature:	ergy Marketing Inc	
noted, approved and duly reco	orded in the records	of the Kansas Corporatio	authorization, surface pit permit # n Commission. This acknowledgment of above injection well(s) or pit permit.	has beenhas been	
flerit Energy Company, LLC				is acknowledged as	
ne new operator and may c	ontinue to inject flu	uids as authorized by	the new operator of the above nar	med lease containing the surface pit	
Permit No.:	Recommended a	ction:	permitted by No.:		
	alene Vale	inette _	Ch	leve Vallignette	
Date: April 15, 2014			Date: April 15, 2014	Authorized Sinest	
	Authorized Sign			Authorized Signature	
DISTRICT	EPR		RODUCTION	UIC NOV 1 4 2014	
Mail to: Past Operator		New Operator		District	

Side Two

Must Be Filed For All Wells

KDOR L	ease No.:	225229		
*Lease N	ame: <u>HUDKINS 'A' 2</u>	*Location:_T34S_R	35W, Sec. 24, SE SE N	IW NE
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)
<i>x2</i>	15-189-22473 ✓	FSC FEL 4030 North, 1450 West, from SE comer	GAS	Producing

RECEIVED KANSAS CORPORATION COMMISSION

MAY 1 6 2014

CONSERVATION DIVISION WICHITA, KS

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

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) T-1 (Transfer) CP-1 (Plugging Application)					
OPERATOR: License	» # 32446	Well Location:			
Name: Merit Energy	Company, LLC	County: Stevens			
Address 1:13727 No	el Rd., Ste. 1200	Lease Name: HUDKINS '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 of			
Contact Person: Arle	ne Valliquette	the lease below:			
Phone: (972) 628-15	58 Fax: (972) 628-1858	T34S R35W, Sec. 24, SE SE NW NE			
Email Address: Arle	ne.Valliquette@meritenergy.com				
Surface Owner Info	rmation:	When filing a Form T-1 involving multiple surface owners, attach an additional			
ODNEAL, GLADYS	S REV TR TTEE	sheet listing all of the information to the left for each surface owner. Surface			
218 E SPRUCE ST	Г	owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.			
LIBERAL, KS 6790	01-4150				
are preliminary nor. Select one of the fol I certify the owner(s) or CP-1 that I form; and 3 I have not packed by task, I acknowledge.	at, pursuant to the Kansas Surface (if the land upon which the subject we am filing in connection with this form it) my operator name, address, phone provided this information to the surface required to send this information to the nowledge that I must provide the name	Owner Notice Act (House Bill 2032), I have provided the following to the surface bell is or will be located: 1) a copy of the Form C-1 or Form CB-1, the plat(s) required by this number, fax, and email address. The locations shown on the plat way be submitted. Owner Notice Act (House Bill 2032), I have provided the following to the surface bell is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form not; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this number, fax, and email address. The locations shown on the plat way be submitted. The locations shown on the plat way be submitted.			
	ond option, submit payment of the \$3 iated Form C-1, Form CB-1, Form T-	30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1 1, or Form CP-1 will be returned.			
I hereby certify that	t the statements made herein are true	and correct to the best of my knowledge and belief.			
Date: <u>April 15, 2014</u>	Signature of Operator or Agent:	Culence Valliguette Title: Regulatory Manager			
		RECEIVED KANSAS CORPORATION COMMISSION			

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

MAY 1 6 2014