040116_HH_Good.pdf

Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

APR 07 2016

Form T-1 July 2014 Form must be Typed

Form must be Signed

REQUEST FOR CHANGE OF OPERATOR RECEIVED Holanks must be Filled TRANSFER OF INJECTION OR SURFACE PIT

Phone: 713-372-1187

Date: ___

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: APRIL 1, 2016 Gas Lease: No. of Gas Wells __1 KS Dept of Revenue Lease No.: 201476 Gas Gathering System: Lease Name: H. H. GOOD GAS UNIT Saltwater Disposal Well - Permit No.: ___ SE _ SE _ NW Sec. 33 Twp. 31S R. 33 E / W feet from N/ S Line Legal Description of Lease: NW/4 T31S R33W SEC 33 __feet from | E / | W Line Enhanced Recovery Project Permit No.: __ County: SEWARD Entire Project: Yes No 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.: S Line of Section (API No. if Drill Pit, WO or Haul) E / W Line of Section **Emergency** Settling Haul-Off Workover 🖉 🔑 🔲 Drilling Contact Person: ___JOHN PHIPPS

Title: TRANSACTION ADVISOR	Signature:			
New Operator's License No. 32446	Contact Person: ARCENE VHLLIQUET TE			
New Operator's Name & Address: MERIT ENERGY COMPANY, LLC	Phone: 972 628-1558			
13727 NOEL RD, STE	Oil / Gas Purchaser: _CHEVRON TEXACO EXPLORATION, INC.			
DALLAS, TEXAS 75240	Date: 4/4/16			
Fille: REGULATORY MANAGER	Date: 4/4/16 Signature: allene Valliquette			
	\mathcal{L}			
Acknowledgment of Transfer: The above request for transfer of injection	2 authorization auricae nit permit #			

Commission records only and does not convey any ownership interest in the above injection well(s) or pit permit. is acknowledged as _ is 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 . Recommended action: permitted by No.: _ Date:

noted, approved and duly recorded in the records of the Kansas Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation

Authorized Signature

Authorized Signature

DISTRICT ... Mail to: Past Operator _

Past Operator's Name & Address: FOUR STAR OIL & GAS COMPANY

P. O. BOX 2100, HOUSTON, TEXAS 77252

Type of Pit:

Past Operator's License No.

New Operator

District

Must Be Filed For All Wells

KCC WICHITA APR 0 7 2016

* Lease Name: H. H. GOOD GAS UNIT			* Location: NW/4 T31S R33W SEC 33		
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	15-175-00496 🗸	2801 FSL FAL	2833 Circle	GAS	PRODUCING
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	-	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL			
		FSL/FNL	FEL/FWL		

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.

KCC WICHITA

KANSAS CORPORATION COMMISSION APR 0 7 2016 OIL & GAS CONSERVATION DIVISION

RECEIVED

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	(Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 32730 Name: Four Star Oil & Gas Company Address 1: PO Box 2100 Address 2:	Well Location: SE_SE_SE_NW Sec. 33 Twp. 31 S. R. 33 East West County: Seward Lease Name: H.H. Good Well #: 1 If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:		
Contact Person: John Phipps Phone: (713) 372-1187 Fax: (713) 372-1107 Email Address: johnphipps@chevron			
Surface Owner Information: Name: Charles & Carolyn Withers Address 1: 6655 Lamar Rd Address 2: City: Reno State: TX Zip: 75462 +	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 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.		
trie NCC with a plat snowing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat n 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 be lo	act (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form oping filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.		
☐ I have not provided this information to the surface owner(s). I ac KCC will be required to send this information to the surface ow task, I acknowledge that I am being charged a \$30.00 handling	cknowledge that, because I have not provided this information, the vner(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	fee with this form. If the fee is not received with this form, the KSONA-1 1 will be returned.		
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.		
Date: 3/16/2016 Signature of Operator or Agent:	Title: Transaction Advisor		