CC WICHITA 040116_WH_Emrie.pdf MMISSION APR 0.7 2016

Kansas Corporation Commission Oil & Gas Conservation Division

July 2014

RECEIVED Form must be Typed
Form must be Signed

All blanks must be Filled

Form T-1

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: MUST be subm	itted with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: APRIL 1, 2016		
Gas Lease: No. of Gas Wells**	KS Dept of Revenue Lease No.: 207447		
Gas Gathering System:	Lease Name: W. H. EMRIE GAS UNIT		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	SESWSENW_Sec31_Twp31S_R36E VW		
feet from E / W Line	Legal Description of Lease:80 AC OUT OF E/2 NW/4 T31S R36W SEC 31		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: STEVENS		
Number of Injection Wells**	Production Zone(s): COUNCIL GROVE GROUP		
Field Name: PANOMA GAS AREA			
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. if Drill Pit, WO or Haul)			
Type of Pit: Emergency Burn Settling	Haul-Off Workover /L Drilling		
Past Operator's License No. 32730 /	Contact Person:JOHN PHIPPS		
Past Operator's Name & Address: FOUR STAR OIL & GAS COMPANY	Phone: _713-372-1187		
P. O. BOX 2100, HOUSTON, TEXAS 77252	Date: 03/28/2016		
Title: TRANSACTION ADVISOR			
Tide:	Signature Supply		
New Operator's License No.	Contact Person: ARLENE VALLIQUE TTE		
New Operator's Name & Address: MERIT ENERGY COMPANY, LLC	Phone: 972 628 628-1558		
13727 NOEL RD, STE 1300	Oil / Gas Purchaser: CHEVRON TEXACO EXPLORATION, INC.		
DALLAS, TEXAS 75240	Date: 4/4/16		
Title: REGULATONY MANAGER			
Title: Act act 7559	Signature: Wilkle Valliz melle		
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 Corporation	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
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		
Permit No.: Recommended action:	permitted by No.:		
. Heconinelland action.	permitted by No		
Date:	Date:		
Date:	Date: Authorized Signature		
DISTRICT EPR4-/5-/6	PRODUCTION 4-18-14 APR 18 2016		
Mail to: Past Operator New Operat			

Side Two

Must Be Filed For All Wells

KCC WICHITA APR 07 2016

KDOR Lease	No.: 207447				RECEIVED	
* Lease Name: W. H. EMRIE GAS UNIT * Location: 80 AC OUT OF E/2 SW T31S R36W SEC 31						
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)	
2	15-189-20374 🗸	2689 FSLAFML	3491 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			
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		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		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 OIL & GAS CONSERVATION DIVISION

APR 07 2016

Form KSONA-1 July 2010 Form Must Be Typed

Form must be Signed

All blanks must be Filled

RECEIVED

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 (C	athodic Protection Borehole Intent)		
OPERATOR: License # 32730 Name: Four Star Oil & Gas Company	Well Location: SE_SW_SE_NW_Sec. 31 Twp. 31 S. R. 36 ☐ East X West		
Address 1: PO Box 2100	County: Stevens		
Address 2:	County: Stevens Lease Name: W.H. Emrie Well #: 2		
City: Houston State: TX Zip: 77252 + 2100 Contact Person: John Phipps Phone: (713) 372-1187 Fax: (713) 372-1107 Email Address: johnphipps@chevron	If filing a Form T-1 for multiple wells on a lease, enter the legal description o the lease below:		
Contact Person: 431 372-1187 - 713 372-1107			
Email Address: johnphipps@chevron			
Surface Owner Information: Name: Lois Morrissey & Helen James Address 1: 1500 Terrace Ave Apt. 220	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		
Address 0.	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.		
Address 2:	county, and in the roal counterproperty tax records of the county treasurer.		
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathod the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on Select one of the following:	batteries, pipelines, and electrical lines. The locations shown on the plat		
▼ I certify that, pursuant to the Kansas Surface Owner Notice Ac	cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this d email address. Anowledge that, because I have not provided this information, the per(s). To mitigate the additional cost of the KCC performing this		
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	ee with this form. If the fee is not received with this form, the KSONA-1 will be returned.		
I hereby certify that the statements made herein are true and correct to the	ne best of my knowledge and belief.		
Date: 3/16/2016 Signature of Operator or Agent.	Title: Transaction Advisor		