### 040116\_Wheeler\_Unit.pdfKCC WICHITA

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

APR 07 2016

Form T-1 July 2014 Form must be Typed

# REQUEST FOR CHANGE OF OPERATOR RECEIVED Form must be Signed All blanks must be Filled 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 submitted 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.: 204173
Gas Gathering System:	Lease Name: WHEELER UNIT
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N /	S Line
feet from E /	W Line Legal Description of Lease: 160 ACRES OUT OF 1/4 T34S R35W SEC1
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: STEVENS
Number of Injection Wells **	Production Zone(s): CHASE GROUP
Field Name: HUGOTON GAS AREA	
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section
	feet from E / W Line of Section
Type of Pit: Emergency Burn Se	ettling Haul-Off Workover DP Drilling
Past Operator's License No32730√	Contact Person: JOHN PHIPPS
Past Operator's Name & Address: FOUR STAR OIL & GAS	
P. O. BOX 2100, HOUSTON, TEXAS 77252	03/28/2016
	Date: Old Old.
Title: TRANSACTION ADVISOR	Signature:
	- A ./
New Operator's License No. 32446 /	Contact Person: HRLENE VHLLIQUETTO
New Operator's Name & Address: MERIT ENERGY COMPA	NY, LLC Phone: 972-000 628-1358
13727 NOEL RD, STE 7200	Oil / Gas Purchaser: CHEVRON TEXACO EXPLORATION, INC.
DALLAS, TEXAS 75240	Date: 4/4/16
RECULATION MANAGER	
Title: REGULATORY MANAGER	Signature: Willie Valliquette
Acknowledgment of Transfer: The above request for trans	sfer of injection authorization, surface pit permit #has been
noted, approved and duly recorded in the records of the Kans	as Corporation Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership	o interest in the above injection well(s) or pit permit.
is ackn	nowledged as is acknowledged as
the new operator and may continue to inject fluids as a	uthorized by the new operator of the above named lease containing the surface pit
Permit No.: Recommended action:	
	, political by Hon
Date:	Date:
Authorized Signature	Authorized Signature
DISTRICT EPR 4-20	0-16 PRODUCTION 4-21-2016
Mail to: Past Operator	New Operator District

#### Side Two

# KCC WICHITA

#### APR 07 2016

#### RECEIVED

#### Must Be Filed For All Wells

204173 KDOR Lease No.: WHEELER UNIT 160 ACRES OUT OF #1/4 T34S R35W SEC1 \* Lease Name: \* Location: Well No. API No. Footage from Section Line Type of Well Well Status (YR DRLD/PRE '67) (i.e. FSL = Feet from South Line) (Oil/Gas/INJ/WSW) (PROD/TA'D/Abandoned) Circle 15-189-00502 2970 2970 **GAS PRODUCING** \_FSL/FNL FEL/FWI FEL/FWL FSL/FNL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL FSL/FNL FEL/FWL F\$L/FNL FEL/FWL FSL/FNL FEL/FWL

A separate sheet may be attached if necessary

<sup>\*</sup> 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 CONSEDIATION TO OIL & GAS CONSERVATION DIVISION

APR 07 2016

Form KSONA-1 July 2010 Form Must Be Typed

### CERTIFICATION OF COMPLIANCE WITH THECEIVED All blanks must be Filled 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)
OPERATOR: License # 32730  Name: Four Star Oil & Gas Company	Well Location:  SE_SE_SE_NW Sec. 1 Twp. 34 S. R. 35 ☐ East 🗵 West
Address 1: PO Box 2100	County: Stevens
Address 0	County: Stevens  Lease Name: Wheeler Unit Well #: 1
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 of the lease below:
Contact Person: 4713 372-1187 - 713 372-1107	
Email Address: johnphipps@chevron	
Surface Owner Information:  Name: B&K Farm Enterprises LLC  Address 1: 3603-A Fairway Dr.  Address 2:	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.
the KCC with a plat showing the predicted locations of lease roads, tank	dic Protection Borehole Intent), you must supply the surface owners and batteries, pipelines, and electrical lines. The locations shown on the plat and 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	ct (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 being 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 owner(s), I acknowledge that I am being charged a \$30.00 handling	cknowledge that, because I have not provided this information, the ener(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 I 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