KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVED TO OIL & GAS CONSERVATION DIVISION

Form T-1 July 2014 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,

Check Applicable Boxes: MUST be subm	itted with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: November 1, 2016  KS Dept of Revenue Lease No.: 202844		
X Gas Lease: No. of Gas Wells 1 **			
Gas Gathering System:	Lease Name: MORGAN		
Saltwater Disposal Well - Permit No.:			
Spot Location:feet from N / S Line	Legal Description of Lease: T 33S R 33W Sec 21 NW 6TH PRINCIPAL		
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: Seward  Production Zone(s): CHASE  Injection Zone(s):		
Number of Injection Wells**			
Field Name: KANSAS HUGOTON			
** Side Two Must Be Completed.			
Surface Pit Permit No	feet from N / S Line of Section		
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling Received KH C		
Past Operator's License No. 33136	Contact Person: Nathan S. Bennett NOV 0 8 2016		
Past Operator's Name & Address: Anadarko E&P Onshore LLC	Phone: (832) 636 - 3283  Date: 10/27/2016  CONSERVATION DIVISION WICHITA, KS		
P.O. Box 1330, Houston, Texas 77251			
Appendix and the Control of the Cont			
Title: Regulatory Manager	Signature:		
New Operator's License No. 32446	Contact Person: Arlene Valliquette		
New Operator's Name & Address: Merit Energy Company, LLC	Phone: (972) 628 - 1558		
	Oil / Gas Purchaser: Merit Energy Company, LLC		
13727 Noel Rd., Suite 1200			
Dallas, Texas 75240	Maller Maller the		
Title: N. Division Regulatory Manager	Signature:		
Acknowledgment of Transfer: The above request for transfer of injection	n authorization, surface pit permit #has been		
noted, approved and duly recorded in the records of the Kansas Corporation	n Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the			
is acknowledged as	is acknowledged as		
the new operator and may continue to inject fluids as authorized by			
Permit No.: Recommended action:			
Petitit No Neconmended action.			
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT	PRODUCTION OF THE PRODUCTION		
Mail to: Past OperatorNew Opera	torDistrict		

#### Side Two

#### Must Be Filed For All Wells

Lease Name:	MORGAN	* Location: 21,33S,33W				
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)	
1-21	1517500148 🗸	2453 FNL	FWL	GAS	PR	
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		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL		- Received	
		FSL/FNL	FEL/FWL		KANSAS CORPORATION COMMISS NOV 0 8 2016	
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION	
		FSL/FNL	FEL/FWL		WICHITA, KS	
		FSL/FNL	FEL/FWL		<u> </u>	
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		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 Conservation Division

Form KSONA-1
July 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	1 (Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 32446	Well Location:		
Name: Merit Energy Company, LLC	Sec. 21 Twp. 33 S. R. 33 East West		
Address 1: 13727 Noel Rd., Suite 1200	County: Seward		
Address 2:			
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 - 1558Fax: ()	<u> -                                   </u>		
Email Address: Arlene.Valliquette@meritenergy.com			
Surface Owner Information:			
Name: Esther Swan	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		
Address 1: RR 2 Box 85			
Address 2:	county, and in the real estate property tax records of the county treasurer.		
City: LiberalState:KSZip:67901+			
are preliminary non-binding estimates. The locations may be entered  Select one of the following:	ank batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
I certify that, pursuant to the Kansas Surface Owner Notice     owner(s) of the land upon which the subject well is or will be	e Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form m being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.		
KCC will be required to send this information to the surface	I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ess of the surface owner by filling out the top section of this form and e 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 Cl	ng fee with this form. If the fee is not received with this form, the KSONA-1 P-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: 10/28/16 Signature of Operator or Agent: Alexa	e Vallegintte Title: North Division Regulatory Manag		