Kansas Corporation Commission 110116_Gerrond_1_17.pdf OIL & GAS CONSERVATION DIVISION

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 submitted	ted with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: November 1, 2016 KS Dept of Revenue Lease No.: 201494 - LE Lease Name: GERROND Sec. 17 Twp. 32 R. 38 Ex W		
X Gas Lease: No. of Gas Wells 1 **			
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:			
Spot Location:feet from N / S Line	Legal Description of Lease: T 32S R 38W Sec 17 All 6TH PRINCIPAL		
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: Stevens		
Number of Injection Wells**	Production Zone(s): CHASE Injection Zone(s):		
Field Name: KANSAS HUGOTON			
** Side Two Must Be Completed.			
Out on Dis Danneis No.	feet from N / S Line of Section		
Surface Pit Permit No.: (API No. if Drill Pit, WO or Haul)	Vancous Vancou		
Type of Pit: Emergency Burn Settling	feet from E / W Line of Section		
	Received		
Past Operator's License No. 33136	Contact Person: Nathan S. Beilliett		
Past Operator's Name & Address: Anadarko E&P Onshore LLC	Phone: (832) 636 - 3283 NOV 0 8 2016 Date: 10/27/2016 CONSERVATION DIVISION WICHITA, KS		
P.O. Box 1330, Houston, Texas 77251			
Title: Regulatory Manager	Signature: MX573		
Title.	Signature.		
New Operator's License No. 32446	Contact Person: Arlene Valliquette		
	Phone: (972) 628 - 1558		
New Operator's Name & Address: Merit Energy Company, LLC			
13727 Noel Rd., Suite 1200	Oil / Gas Purchaser: Merit Energy Company, LLC		
Dallas, Texas 75240	Date: 10/27/16		
Title: N. Division Regulatory Manager	Signature: Weleve Vallequette		
Acknowledgment of Transfer: The above request for transfer of injection			
	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 pi		
Permit No.: Recommended action:	permitted by No.:		
Date:	Date: Authorized Signature		
Authorized Signature	EER 0.7 2017 FFB 0.7 2011		
DISTRICTEPR 2/6/ /7 PF Mail to: Past OperatorNew Operator	RODUCTION UICI TO		
Mail to: Past Operator New Operator	Olothot		

Must Be Filed For All Wells

Lease Name: GERROND			* Location:* Location:*			
Well No. API No. (YR DRLD/PRE '67)			Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)	
1-17	1518900281	177 FSL	2522 FWL /	GAS	PR	
Management and the second seco		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		<u> </u>	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	V		
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		Received KANSAS CORPORATION COMMISSION	
2.		FSL/FNL	FEL/FWL		NOV 0 8 2016	
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION — WICHITA, KS	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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Appendix of the second		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.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form KSONA-1
July 2014
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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 filedC-1 (intent)CB-1 (c	Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 32446	Well Location:		
Name: Merit Energy Company, LLC			
Address 1: 13727 Noel Rd., Suite 1200	County: Stevens		
Address 2:	Lease Name: GERROND Well #: 1-17		
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: ()	Received		
Email Address: Arlene.Valliquette@meritenergy.com	KANSAS CORPORATION COMMISSION		
Linaii Addiess.	NOV 0 8 2016		
Surface Owner Information:	CONSERVATION DIVISION WICHITA, KS		
Name: David & Shirley Bozone Living Trust, Trustees	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: 176 Road R	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 2:	county, and in the real estate property tax records of the county treasurer.		
City: Rolla State: KS Zip: 67954- +			
Oity			
are preliminary non-binding estimates. The locations may be entered or Select one of the following: I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be le CP-1 that I am filling in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, at	Act (House Bill 2032), I have provided the following to the surface ocated: 1) a copy of the Form C-1, Form CB-1, the plat(s) required by this nd email address. Cacknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this		
task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the h	s of the surface owner by filling out the top section of this form and KCC, which is enclosed with this form. fee with this form. If the fee is not received with this form, the KSONA-1		
I hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.		
	North Division Regulatory Manage		