### 110116\_Kelly\_E\_1H.pdf

### KANSAS CORPORATION COMMISSION 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,
MUST be submitted with this form

Check Applicable Boxes:	tted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: November 1, 2016
X Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: 216424 / KR
Gas Gathering System:	Lease Name: KELLY E
Saltwater Disposal Well - Permit No.:	
Spot Location:feet from N / S Line	
feet from E / W Line	Legal Description of Lease: T 30S R 34W Sec 30 NW 6TH PRINCIPAL
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Haskell
Number of Injection Wells**	Production Zone(s): CHASE
Field Name: KANSAS HUGOTON	Injection Zone(s):
** Side Two Must Be Completed.	
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from □ N / □ S Line of Section Received feet from □ E KANSASOORROPATION
Type of Pit: Emergency Burn Settling	Haul-Off Workover DNOV 0 8 2016 KH
Past Operator's License No. 33136	Contact Person: Nathan S. Bennett CONSERVATION DIVISION
Past Operator's Name & Address: Anadarko E&P Onshore LLC	Phone: (832) 636 - 3283
P.O. Box 1330, Houston, Texas 77251	Date: 10/27/2016
Title: Regulatory Manager	1101
Title:	Signature:
New Operator's License No. 32446	Contact Person: Arlene Valliquette
New Operator's Name & Address: Merit Energy Company, LLC	Phone: (972) 628 - 1558
13727 Noel Rd., Suite 1200	Oil / Gas Purchaser: Merit Energy Company, LLC
Dallas, Texas 75240	Date: 10/27/16
	Signature: allegiette
Title: N. Division Regulatory Manager	Signature: Walker or delignette
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # has been
noted, approved and duly recorded in the records of the Kansas Corporation C	
Commission records only and does not convey any ownership interest in the a	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.:
Date: Authorized Signature	Date: Authorized Signature
1 20 18	ODUCTION JAN 3 1 2017 UIC JAN 3 1 2017
Mail to: Past Operator	

#### Must Be Filed For All Wells

* Lease Name:	KELLY E		* Location: 30	),30S,34W	
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr	Section Line om South Line)	Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
1H	1508120530	1226 FNL	1289 FWL	GAS	PR
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
MANAGAMA MA		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	: YANSAS	Received CORPORATION COMMISSION
	<u>\$</u>	FSL/FNL	FEL/FWL		10V 0 8 2016
		FSL/FNL	FEL/FWL		NSERVATION DIVISION WICHITA, KS
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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THE RESIDENCE OF THE PARTY OF T		FSL/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 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.

OPERATOR: License # 32446  Name: Merit Energy Company, LLC	Well Location:		
Address 1: 13727 Noel Rd., Suite 1200	County: Haskell		
Address 2:	Lease Name: KELLY E Well #: 1H		
City: Dallas State: TX Zip: 75240 +			
Contact Person: Arlene Valliquette	the lease below:		
Phone: (972) 628 - 1558Fax: ()	Received		
Email Address: Arlene.Valliquette@meritenergy.com			
	NOV 0 8 2016		
Surface Owner Information:	CONSERVATION DIVISION WICHITA, KS		
Name: Barbara Anglin, et al	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: 1230 Chateau Rd	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:			
City: Pasadena State:CA Zip: 91105 +			
	red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
Select one of the following:  X   certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will	tice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this		
Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, fall I have not provided this information to the surface owner(standard will be required to send this information to the surface.	tice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address.  S). I acknowledge that, because I have not provided this information, the ce owner(s). To mitigate the additional cost of the KCC performing this dress of the surface owner by filling out the top section of this form and		
I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the f form; and 3) my operator name, address, phone number, fall I have not provided this information to the surface owner(s KCC will be required to send this information to the surfact task, I acknowledge that I must provide the name and add that I am being charged a \$30.00 handling fee, payable to a following the second option, submit payment of the \$30.00 handling the second option is the second option of the \$30.00 handling the	tice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this ax, and email address.  S). I acknowledge that, because I have not provided this information, the ce owner(s). To mitigate the additional cost of the KCC performing this dress of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1		
I certify that, pursuant to the Kansas Surface Owner Not owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the f form; and 3) my operator name, address, phone number, face I have not provided this information to the surface owner(stack, I acknowledge that I must provide the name and additional to the surface of the surface of the surface owner(stack). I acknowledge that I must provide the name and additional that I am being charged a \$30.00 handling fee, payable to the surface owner(stack).	tice Act (House Bill 2032), I have provided the following to the surface I be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this fax, and email address.  (a). I acknowledge that, because I have not provided this information, the ce owner(s). To mitigate the additional cost of the KCC performing this dress of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.  (dling fee with this form. If the fee is not received with this form, the KSONA-1 of CP-1 will be returned.		