### 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: MUST be submi	itted with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: November 1, 2016		
Gas Lease: No. of Gas Wells 1 **	KS Dept of Revenue Lease No.: 206337		
Gas Gathering System:			
Saltwater Disposal Well - Permit No.:			
Spot Location:feet from N / S Line feet from E / W Line	Legal Description of Lease: T 33S R 40W Sec 8 NE 6TH PRINCIPAL		
Enhanced Recovery Project Permit No.:			
Entire Project: Yes No	County: Morton		
Number of Injection Wells**	Production Zone(s): COUNCIL GROVE		
Field Name: PANOMA			
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.:  (API No. if Drill Pit, WO or Haul)  Type of Pit: Emergency Burn Settling	feet from N / S Line of Section  feet from E / W Line of Section  Haul-Off Workover Drilling		
33136	Contact Person: Nathan S. Bennett		
Past Operator's License No. 33136 V			
Past Operator's Name & Address: Anadarko E&P Onshore LLC	Phone: (832) 636 - 3283  Date: 10/27/2016		
P.O. Box 1330, Houston, Texas 77251			
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  Wansas Corporation Commission  Oil / Gas Purchaser: Merit Energy Company, LLC		
13727 Noel Rd., Suite 1200	Oil / Gas Purchaser: Merit Energy Company, LLC		
Dallas, Texas 75240	10/ 1/8 204		
Title: N. Division Regulatory Manager	Date: 10/37/16 CONSERVATION DIVISION Signature: Allequette WICHITA, KS		
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
is acknowledged as	is acknowledged as		
the new operator and may continue to inject fluids as authorized by  Permit No.: Recommended action:	the new operator of the above named lease containing the surface pit permitted by No.:		
Date:	Date:		
Date: Authorized Signature	Authorized Signature		
DISTRICT         EPR         1/26/17         P           Mail to: Past Operator         New Operato	RODUCTION 1 27 2017  District		

#### Must Be Filed For All Wells

Lease Name: LOW A		* Location: 8,33S,40W				
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)	
3	1512910205 -0 0-01	1953 FNL	2002 FEL	GAS	IN	
		FSL/FNL	FEL/FWL			
27		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			
ACCORDING TO THE PARTY OF THE P		FSL/FNL	FEL/FWL	KANSAS CORPODATION	d	
		FSL/FNL	FEL/FWL	KANSAS CORPORATION	COMMISSION	
		FSL/FNL	FEL/FWL	CONSERVATION		
		FSL/FNL	FEL/FWL	WICHITA, KS		
		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 (Cat	hodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License # 32446	Well Location:			
Name: Merit Energy Company, LLC	Sec8 Twp33 S. R. 40 East X West			
Address 1: 13727 Noel Rd., Suite 1200	County: Morton			
Address 2:	Lease Name: LOW AWell #: _3			
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: ()				
Email Address: Arlene.Valliquette@meritenergy.com				
Received				
Surface Owner Information: Name: USFS  KANSAS CORPORATION COMM NOV 0 8 2016				
Address 1: 740 Simms St. Conservation Division Wichita, KS	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.			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathodic the KCC with a plat showing the predicted locations of lease roads, tank be are preliminary non-binding estimates. The locations may be entered on the	patteries, pipelines, and electrical lines. The locations shown on the plat			
Select one of the following:				
I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be loca CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and	ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this			
I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface owner task, I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KC	er(s). To mitigate the additional cost of the KCC performing this  If the surface owner by filling out the top section of this form and			
If choosing the second option, submit payment of the \$30.00 handling feet form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 v	e 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	e best of my knowledge and belief.			
Date: 10/28/16 Signature of Operator or Agent: Aulene	North Division Regulatory Manager			