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:	led 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.: 206356		
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 16 ALL 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)	feet from N / S Line of Sectionfeet from E / W Line of Section		
Type of Pit:	Haul-Off Workover Drilling KX		
Past Operator's License No. 33136	Contact Person: Nathan S. Bennett		
	Phone: (832) 636 - 3283		
Past Operator's Name & Address: Anadarko E&P Onshore LLC	Date: 10/27/2016		
P.O. Box 1330, Houston, Texas 77251			
Title: Regulatory Manager	Signature:		
New Operator's License No. 32446 V	Contact Person: Arlene Valliquette Phone: (972) 628 - 1558 Received Received Cit (Con Purchaser, Merit Energy Company, LLC NOV 0.0		
New Operator's Name & Address: Merit Energy Company, LLC	Phone: (972) 628 - 1558		
13727 Noel Rd., Suite 1200	() II / (328 PIII Chasel III III III III III III III III III I		
	Date: 10/27/16 CONSERVATION DIVISION Signature: Wight, KS		
Dallas, Texas 75240	Signature: allene Vallquette XS		
Title: N. Division Regulatory Manager	Signature: Whene Vallequette		
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit # has been		
	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
Commission records only and does not convey any ownership interest in the a			
	I Proposition the first of the		
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.:		
, Noorming a dolon.			
Date:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR 1/26/17 PR	RODUCTION 127 17 JAN 27 2017		
Mail to: Past OperatorNew Operator	District		

Side Two

Must Be Filed For All Wells

* Lease Name: LOW F			* Location:16,33S,40W			
Well No. API No. (YR DRLD/PRE '67)		Footage from (i.e. FSL = Feet fr	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandone	
	1512920162	1254 FNL	2269 FEL	GAS	PR	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		_	
		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		_	
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A-13 minut 1 4 8 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		FSL/FNL	FEL/FWL		Received	
		FSL/FNL	FEL/FWL	KANSA	OOKPORATION COMMISSION	
		FSL/FNL	FEL/FWL	CO	NOV 0 8 2016 ASERVATION DIVISION WICHITA RE	
		FSL/FNL	FEL/FWL		WICHITA, KS	
		FSL/FNL	FEL/FWL			
		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

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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.

OPERATOR: License # 32446	Well Location:		
Name: Merit Energy Company, LLC	Sec. 16 Twp. 33 S. R. 40 East X West		
Address 1: 13727 Noel Rd., Suite 1200	County: Morton		
Address 2:	Lease Name: LOW FWell #: _1		
City: Dallas State: TX Zip: 75240 +	If filing a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: Arlene Valliquette	the lease below:		
Phone: (972) 628 - 1558Fax: ()			
Email Address: Arlene.Valliquette@meritenergy.com			
Popular			
KANSAS CORPORATION COMMISSION Surface Owner Information:			
Name: USFS NOV 0 8 2016	When filing a Form T-1 involving multiple surface owners, attach an additional		
Address 1: 740 Simms St. CONSERVATION DIVISION WICHITA, KS	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: Lakewood State:CO Zip: 80225 +			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Cathod	dic Protection Borehole Intent), you must supply the surface owners and		
the KCC with a plat showing the predicted locations of lease roads, tank	k batteries, pipelines, and electrical lines. The locations shown on the plat the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
Select one of the following:			
owner(s) of the land upon which the subject well is or will be lo	act (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.		
KCC will be required to send this information to the surface ow	cknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this of the surface owner by filling out the top section of this form and CCC, 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 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: Auline	Vallequette North Division Regulatory Manager		