#### 110116\_Troup\_B.pdf Kansas Corporation Commission

OIL & GAS CONSERVATION DIVISION

# SCANNED REQUEST FOR CHANGE OF OPERATOR TRANSFER OF INJECTION OR SURFACE PIT PERMIT

Form T-1 July 2014 Form must be Typed Form must be Signed All blanks must be Filled

Check Applicable Boxes: KSONA-1, Certification of Compliance  MUST be subm	with the Kansas Surface Owner Notification Act, itted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer, November 1, 2016
X Gas Lease: No. of Gas Wells 1	
Gas Gathering System:	KS Dept of Revenue Lease No.: 206386 ✓/⟨R
Saltwater Disposal Well - Permit No.:	Lease Name: TROUP B
Spot Location:feet from N / S Line	
feet from  E / W Line	Legal Description of Lease: T 33S R 38W Sec 9 NE 6TH PRINCIPAL
Enhanced Recovery Project Permit No.:	
Entire Project: Yes No	County: Stevens
Number of Injection Wells**	
Field Name: PANOMA	Production Zone(s): COUNCIL GROVE
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	feet from N / S Line of Section
(API No. if Drill Pit. WO or Haul)	
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling
	Haul-Off Workover Drilling ¥H
Past Operator's License No. 33136 /	Contact Person: Nathan S. Bennett
Past Operator's Name & Address: Anadarko E&P Onshore LLC	Phone: (832) 636 - 3283 Ransas Corporation Commiss
P.O. Box 1330, Houston, Texas 77251	Date: 10/27/2016 NOV 0 8 2016
Title: Regulatory Manager	Signature: CONSERVATION DIVISION WICHITA, KS
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: 10/28/16
Title: N. Division Regulatory Manager	Signature: Alexe Vallequette
Acknowledgment of Transfer: The above request for transfer of injection a	authorization, surface pit permit #has beer
noted, approved and duly recorded in the records of the Kansas Corporation C	Commission. This acknowledgment of transfer pertains to Kansas Corporation
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 a
he new operator and may continue to inject fluids as authorized by	the new operator of the above named lease containing the surface p
Permit No.: Recommended action:	permitted by No.:
	, and the second
Date:	Date:
Authorized Signature	Authorized Signature
	ODUCTION FEB 0 8 2017 UTCEB 0 8 2017
Mail to: Past Operator New Operator	District

Side Two

#### Must Be Filed For All Wells

KDOR Lease	e No.: 206386				
* Lease Name	TROUP B		* Location: 9,	,33S,38W	
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fr	Section Line rom South Line)	Type of Well (Oil/Gas/INJ/W	Well Status SW) (PROD/TA'D/Abandoned)
I	1518920194 🗸	FNL	1304 FEL	GAS	PR
		FSL/FNL	FEL/FWL		
HARVAII IA		FSL/FNL	FEL/FWL		
**************************************		FSL/FNL	FEL/FWL		
ud-		FSL/FNL	FEL/FWL		
W 77 W A.L.		FSL/FNL	FEL/FWL		<u> </u>
O-MARIN.	. '	F\$L/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		Received AS CORPORATION COMMISSION
		FSL/FNL	FEL/FWL	KANS/	NOV 0 8 2016
	· <del></del>	FSL/FNL	FEL/FWL		CONSERVATION DIVISION
		FSL/FNL	FEL/FWL		WICHITA, KS
		F\$L/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		<del></del>
		FSI /FNI	EEL/EW/	:	

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	(Cathodic Protection Borehole Intent)	T-1 (Transfer) CP-1 (Plugging Application)	
OPERATOR: License # 32446	Well Location:		
Name: Merit Energy Company, LLC	Sec.	9 Twp. 33 S. R. 38 East X West	
Address 1: 13727 Nocl Rd., Suite 1200	County: Stevens		
Address 2:	Lease Name: TROUP B	Well #: 1	
Sity: Dallas State: TX Zip: 75240 +		ple wells on a lease, enter the legal description of	
Contact Person: Arlene Valliquette	the lease below:	Received	
Phone: (972) 628 - 1558Fax: ()		KANSAS CORPORATION COMMISSION	
mail Address: Arlene.Valliquette@meritenergy.com		NOV 0 8 2016	
		CONSERVATION DIVISION	
Surface Owner Information:		WICHITA, KS	
fr. T	Mhan filing a Form T-1 inv	olving multiple surface owners, attach an additional	
Idress 1: 721 Marcy St	sheet listing all of the infor	rmation to the left for each surface owner. Surface	
ddress 2:		ound in the records of the register of deeds for the le property tax records of the county treasurer.	
Oity: Ottawa State:IL Zip: 61350- +	•		
f this form is being submitted with a Form C-1 (Intent) or CB-1 (Cath he KCC with a plat showing the predicted locations of lease roads, tar are preliminary non-binding estimates. The locations may be entered c	nk batteries, pipelines, and ele	ectrical lines. The locations shown on the plat	
Select one of the following:    Certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	located: 1) a copy of the For	m C-1, Form CB-1, Form T-1, or Form	
CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, a		Form CB-1, the plat(s) required by this	
I have not provided this information to the surface ownér(s). I KCC will be required to send this information to the surface of task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the	owner(s). To mitigate the add ss of the surface owner by fill	tional cost of the KCC performing this ng out the top section of this form and	
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		is not received with this form, the KSONA-1	
	- i wiii be returried.		
hereby certify that the statements made herein are true and correct to Date: 10/28/16 Signature of Operator or Agent: Which		nd belief.	