Kansas Corporation Commission OIL & GAS CONSERVATION DIVISION

110116_Cave.pdf 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 submit	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 **	KS Dept of Revenue Lease No.: 200631			
Gas Gathering System:	Lease Name: CAVE			
Saltwater Disposal Well - Permit No.:	NE -NE - NE - Sec. 25 Twp. 28 R. 33 EXW			
Spot Location:feet from N / S Line				
feet from E / W Line	Legal Description of Lease: T 28 S R 33W Sec 25 SW 6TH PRINCIPAL			
Enhanced Recovery Project Permit No.:				
Entire Project: Yes No	County: Haskell Production Zone(s): CHASE			
Number of Injection Wells**				
Field Name: KANSAS HUGOTON	Injection Zone(s):			
** Side Two Must Be Completed.	mjodion Zono(o).			
Surface Pit Permit No.:	feet from N / S Line of Section			
(API No. if Drill Pit, WO or Haul)	feet from			
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling KCC WICHIT			
Past Operator's License No. 33002	Contact Person: Bertha Nefe MAR 1 4 2017			
Past Operator's Name & Address: Kerr-McGee Oil & Gas Onshore LP	Phone: (832) 636 - 3362 RECEIVED			
P.O. Box 1330, Houston, Texas 77251	Date: 3/1/2017			
Control of the Contro				
Title: Regulatory Manager	Signature: Berther Nefe			
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: 3/7/17			
Title: N. Division Regulatory Manager	Signature: Mem Vallquette			
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	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 pit			
Permit No.: Recommended action:	permitted by No.:			
Date:	Date:			
Authorized Signature	Authorized Signature			
DISTRICTEPR	RODUCTION MAR 16 2017 UIC 3-16-17			
Mail to: Past OperatorNew Operator	District			

Side Two

Must Be Filed For All Wells

KDOR Lease	e No.: 200631					
* Lease Name	CAVE		* Lo	cation: 25	5,28S,33W	- And Andrews
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)
1	1508100230		2490 2790	FEL	GAS	PR
		FSL/FNL		_FEL/FWL		
		FSL/FNL		_FEL/FWL		
		FSL/FNL		_FEL/FWL		
				 _FEL/FWL		
				_FEL/FWL		
				-		-
				_FEL/FWL		_
				_FEL/FWL		KCC WICHITA
		FSL/FNL		_FEL/FWL		
		FSL/FNL		_FEL/FWL		MAR 1 4 2017
		FSL/FNL	<u> </u>	_FEL/FWL		RECEIVED
***************************************		FSL/FNL		_FEL/FWL		
		FSL/FNL		_FEL/FWL	-	
www.		FSL/FNL	<u></u>	_FEL/FWL	4	
****		FSL/FNL	1	_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		

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 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 (Ca	athodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 32446 Name: Merit Energy Company, LLC Address 1: 13727 Noel Rd., Suite 1200 Address 2:	Well Location: NE-NE-Sin Sec. 25 Twp. 28 S. R. 33 East West County: Haskell Lease Name: CAVE Well #: 1 If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Phone: (972) 628 - 1558Fax: () Email Address: Arlene.Valliquette@meritenergy.com	KCC WICHITA MAR 1 4 2017
Surface Owner Information: Name: Tice Cattle Co., c/o Paul Brown Address 1: P.O. Box 250 Address 2: City: Sublette State:KSZip: 67877 _ +	When filing a Form T-1 involving multiple surface owners, attach an additional 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 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 (Cathod the KCC with a plat showing the predicted locations of lease roads, tank are preliminary non-binding estimates. The locations may be entered on t	batteries, pipelines, and electrical lines. The locations shown on the plat
owner(s) of the land upon which the subject well is or will be loc	ct (House Bill 2032), I have provided the following to the surface cated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ceing filed is a Form C-1 or Form CB-1, the plat(s) required by this d email address.
KCC will be required to send this information to the surface owr	knowledge that, because I have not provided this information, the ner(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 CC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 handling fe form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1	
I hereby certify that the statements made herein are true and correct to the Date: 3/7/17 Signature of Operator or Agent: Alene	ne best of my knowledge and belief. North Division Regulatory Manager Title: