KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

July 2014 Form must be Typed Form must be Signed All blanks must be Filled

Form T-1

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,

Form KSONA-1, Certification of Compliance w MUST be submit	tou min m
check Applicable Boxes:	Effective Date of Transfer: November 1, 2016
Oil Lease: No. of Oil Wells**	KS Dept of Revenue Lease No.: 208556
X Gas Lease: No. of Gas Wells 1 **	1
Gas Gathering System:	Lease Name: COX B
Saltwater Disposal Well - Permit No.:	Sec IWP.
Spot Location:feet from N / S Linefeet from E / W Line	Legal Description of Lease: T 34S R 39W Sec 34 NE 6TH PRINCIPAL
Enhanced Recovery Project Permit No.:	County: Stevens
Entire Project: Yes No	
Number of Injection Wells**	Production Zone(s): COUNCIL GROVE
Field Name: PANOMA	Injection Zone(s):
** Side Two Must Be Completed.	
(George Market St. 1948 - St.	feet from N / S Line of Section
Surface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from E / W Line of Section
1 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Drilling KH
Type of Pit: Emergency Burn Settling	Haul-Oli
33136	Contact Person: Nathan S. Bennett Received KANSAS CORPORATION COMMISSION
Past Operator's License No. 33136	(922) 636 - 3283
Past Operator's Name & Address: Anadarko E&P Onshore LLC	1404 00 ===
P.O. Box 1330, Houston, Texas 77251	Date: 10/27/2016 CONSERVATION DIVISION WICHITA, KS
Title: Regulatory Manager	Signature: WICHITA, NO
	Contact Person: Arlene Valliquette
New Operator's License No. 32446	
New Operator's Name & Address: Merit Energy Company, LLC	Phone: (972) 628 - 1558
	Oil / Gas Purchaser: Merit Energy Company, LLC
13727 Noel Rd., Suite 1200	Date: 10/28/16
Dallas, Texas 75240	William Halling the
Title: N. Division Regulatory Manager	Signature:
	has beenhas been
Acknowledgment of Transfer: The above request for transfer of inject	ion authorization, Surface pit permits
and duly recorded in the records of the Kansas Corporat	tion Commission. This dollars again
noted, approved and duly recorded in the recor	the above injection well(s) or pit permit.
	is acknowledged a
is acknowledged	
the 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:	
Permit No.:	
	Date: Authorized Signature
Date:	Authorized digitation
DISTRICTEPR2/16/17 New Op	PRODUCTION FEB 1 7 2017 UIC FEB 1 7 2017
DISTRICTNew Op	eratorDistrict

Must Be Filed For All Wells

Footage from Se (i.e. FSL = Feet from	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)
4034 FSL 1249 FNL	1353 FEL	insp. Dist 1	PR
FSL/FNL	FEL/FWL		
	FEL/FWL		
	FEL/FWL		
	FEL/FWI		
	FEL/FWl		
			Received KANSAS CORPORATION COMMISSI
			NOV 0 8 2016
	7- 1		CONSERVATION DIVISION WICHITA, KS
			1249 FNL 1353 FEL GAS FEL FE

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.

PERATOR: License # 32446 Ame: Merit Energy Company, LLC Bddress 1: 13727 Noel Rd., Suite 1200 Bddress 2:	Well Location:Sec34Twp34S. R39East X West County: Stevens
ddress 1: 13727 Noel Rd., Suite 1200	County: Stevens
ddress 1: 13727 Noel Rd., Suite 1200	
	Lease Name: COX B
	Lease Name: CONB If filing a Form T-1 for multiple wells on a lease, enter the legal description of
ty: Dallas State: TX Zip: 73240 +	If filing a Form T-1 for multiple wells on a lease, enter the logal decap- the lease below:
ontact Person: Arlene Valliquette	-
hone: (972) 628 - 1558Fax: ()	_
mail Address: Arlene.Valliquette@meritenergy.com	
AND THE STATE OF T	
Surface Owner Information:	
Roy L. Cox	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 sheet listing all of the information to the left for each surface owner. Surface
oddress 1: HC 2 Box 47	— owner information can be found in the records of the county treasurer.
Address 2:	
Address 2:	_
Select one of the following:	s, tank batteries, pipelines, and electrical lines. The locations are builtied. red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
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, form	otice Act (House Bill 2032), I have provided the following to the surface II 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.
I have not provided this information to the surface owner(s	s). I acknowledge that, because I have not provided this information, the ace owner(s). To mitigate the additional cost of the KCC performing this ddress of the surface owner by filling out the top section of this form and the KCC, which is enclosed with this form.
that I am being charged a \$30.00 handling ice, payable to	
that I am being charged a \$30.00 handling lee, payable to	ndling fee with this form. If the fee is not received with this form, the KSONA-
If choosing the second option, submit payment of the \$30.00 han form and the associated Form C-1, Form CB-1, Form T-1, or Form	ndling fee with this form. If the fee is not received with this form, the KSONA- m CP-1 will be retumed.
that I am being charged a \$30.00 handling ice, payable to	ndling fee with this form. If the fee is not received with this form, the KSONA-m CP-1 will be returned. Treat to the best of my knowledge and belief.