KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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,

Form KSONA-1, Certification of Compilative W MUST be submitte	ted with this form.		
neck Applicable Boxes: Oil Lease: No. of Oil Wells**	Effective Date of Transfer: November 1, 2016		
1	KS Dept of Revenue Lease No.: 204326 VILR		
Gas Lease: No. of Gas Wells_1 Gas Gathering System:	Lease Name: WRIGHT		
Gas Gathering System Saltwater Disposal Well - Permit No.:	Lease Name:		
Spot Location:feet from N / S Line	- Sec. IWP		
feet from E / W Line	Legal Description of Lease: T 34S R 38W Sec 4 SE 6TH PRINCIPAL		
Enhanced Recovery Project Permit No.:	County: Stevens		
Entire Project: Yes No	Production Zone(s): CHASE		
Number of Injection Wells**			
ield Name: KANSAS HUGOTON	Injection Zone(s):		
** Side Two Must Be Completed.			
Gurface Pit Permit No.:(API No. if Drill Pit, WO or Haul)	feet from N / S Line of Section feet from E / W Line of Section Drilling ived Received Rece		
Type of Pit: Emergency Burn Settling	Haul-Off Workover Drilling Received Received CORPORATION COMMISSION		
33136 /	Contact Person: Nathan S. Bennett 18 2016		
Past Operator's License No. 33136 /	Phone: (832) 636 - 3283		
Past Operator's Name & Address: Anadarko E&P Onshore LLC	Phone: (832) 636 - 3283 Date: 10/27/2016 CONSERVATION DIVISION WICHITA, KS		
P.O. Box 1330, Houston, Texas 77251	#155		
Title: Regulatory Manager	Signature:		
32446	Contact Person: Arlene Valliquette		
New Operator's License No. 32446	Phone: (972) 628 - 1558		
New Operator's Name & Address: Merit Energy Company, LLC	Oil / Gas Purchaser: Merit Energy Company, LLC		
13727 Noel Rd., Suite 1200			
Dallas, Texas 75240	Date: 10/28/16 Signature: Arlene Vallezintle		
Title: N. Division Regulatory Manager	Signature: William Valle State		
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	on Commission. This acknowledgment of transfer portains		
is acknowledged a	sis acknowledged as		
NAME OF THE PARTY	lease containing the surface D		
the new operator and may continue to inject fluids as authorized b			
Permit No.: Recommended action:	permitted by No.:		
Date:	Date: Authorized Signature		
DateAuthorized Signature	FER 17 2017 FEB 17 2011		
DISTRICTEPR_ 2/16/17	PRODUCTION District		

Must Be Filed For All Wells

KDOR Lease No.: 204326 Lease Name: WRIGHT		* Location:4,34S,38W			
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line Type of Well		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1-4	1518900621 🗸	1229 FSL	1319 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		Re	ceived RATION COMMISSION
		FSL/FNL	FEL/FWL	KIOA	(1 8 5010
					VATION DIVISION VICHITA, KS
who have any side of a later or a second or the second of		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	, p	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
201420000000000000000000000000000000000		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
and the second s		FSL/FNL	FEL/FWL	*	
AND THE PROPERTY OF THE PROPER		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 (Cathodic Protection Borehole Intent) X T-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 32446	Well Location:		
Name: Merit Energy Company, LLC			
Address 1: 13727 Noel Rd., Suite 1200	County: Stevens		
Address 2:	Lease Name: WRIGHTWell #:1-4		
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: Received KANSAS CORPORATION COMMISSION KANSAS CORPORATION COMMISSION		
Contact Person: Arlene Valliquette			
Phone: (972) 628 - 1558Fax: ()	KANSAS CORPORATION		
Email Address: Arlene. Valliquette@meritenergy.com	NOV 08 2016 CONSERVATION DIVISION WICHITA, KS		
Surface Owner Information: Name: Gregory & Sherry Morris Address 1: 501 S Wildcat Ct. Address 2:	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.		
are preliminary non-binding estimates. The locations may be entered or Select one of the following:	k batteries, pipelines, and electrical lines. The locations shown on the plat n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
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, at I have not provided this information to the surface owner(s). I a	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 nd email address. acknowledge that, because I have not provided this information, the		
task, I acknowledge that I must provide the name and address that I am being charged a \$30.00 handling fee, payable to the k	wner(s). To mitigate the additional cost of the KCC performing this s of the surface owner by filling out the top section of this form and KCC, 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-	fee with this form. If the fee is not received with this form, the KSONA-1 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: Allers	Wallgrutte		