Kansas Corporation Commission Oil & Gas Conservation Division

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

Form T-July 201 Form Must be Typed Form mank be Signed

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Notification Act, Check Applicable Boxes: MUST be submitted with this form. Oil Lease: No. of Oil Wells December 1, 2016 Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 231611 + 139882 KR Gas Gathering System: Central Life Lease Name: Saltwater Disposal Well - Permit No.: - SE - SE Sec. 3 Twp. 35 R. 42 Spot Location: feet from N / Sec. 3-35S-42W feet from E / W Line Legal Description of Lease: Enhanced Recovery Project Permit No.: Entire Project: Yes : No Morton County: Number of Injection Wells Production Zone(s): Taloga Morrow Greenwood Field Name: Injection Zone(s): ** Side Two Must Be Completed. Surface Pit Permit No.: feet from S Line of Section (API No. if Drill Pit, WO or Haul) W Line of Section Type of Pit: Emergency Burn Settling Haul-Off KH! Workover Drilling 32638 🖊 Past Operator's License No. James F. Adelson Contact Person: Nadel and Gussman LLC 918-583-3333 Past Operator's Name & Address: Phone: 15 E. 5th St., Suite 3300, Tulsa, OK 74103 Title: Manager Signature: New Operator's License No. Arlene Valliquette Contact Person New Operator's Name & Address: Merit Energy Company, LLC Phone: 13727 Noel Road, Suite 1200, Dallas, TX 75240 Oil / Gas Purchaser: NCRA / Energy Transfer Received KANSAS CORPORATION COMMISSION 12/01/16 Title: North Division Regulatory Manager Signature: CONSERVATION DIVISION Acknowledgment of Transfer: The above request for transfer of injection 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 DISTRICT uic 2-28-17 Mail to: Past Operator New Operator District

Must Be Filed For All Wells

KDOR Lease No.: 231611 + 139882

*Lease Name:	No.: 231611 + 13988 Central Life				Location:	Sec. 3-35S	-42W	
Well No.	API No. (YR DRLD/PRE '67)	(i.e. l	ootage from S FSL = Feet from	Section LI om South	ne Line)	Type o (Oil/Gas/II	f Well NJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1-3J	15-129-20624-0001	684	Circle FSDFNL	675	Circle FEDFWL	Gas		Prod
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			and the second second second second second
			FSL/FNL		FEL/FWL		man	
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
	· · · · · · · · · · · · · · · · · · ·	A. v. continuetour Aceta	FSL/FNL	You did so an an agreemen	FEL/FWL		um commo co mo mo mo uma commo colores ele-	w
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL	T I Dr. AND Marie and American		
			FSUFNL		FEL/FWL	~		
			FSL/FNL		FEL/FWL	state-resourced to colored a designation of the state of	annealla seeraan seekkasinge	, may to the strong strong and the same
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
		ny waliony denière a consume	FSL/FNL		FEL/FWL		5	
			FSL/FNL		FEL/FWL	and		
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL			
			FSL/FNL		FEL/FWL	1 1 60		wall summand was a second

A separate sheet may be attached if necessary

FEL/FWL

FSL/FNL

^{*} 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.

Name: Nadel and Gussman LLC	Well Location:
valle.	SE Sec. 3 Twp. 35 S. R. 42 East 🗴 West
Address 1: 15 E. 5th St., Suite 3300	County: Morton
Address 2: James Knipe	Lease Name: Central Life Well #: 1-3J
State: OK Zip: 74103	If filing a Form T-1 for multiple wells on a lease, enter the legal description of
Contact Person:	the lease below:
hone: (918) 583-3333 Fax: (918) 583-0888	
mail Address: Jknipe@naguss.com	
urface Owner Information:	
ame: see Attachment	When filing a Form T-1 involving multiple surface owners, attach an additional
ddress 1:	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
ddress 2:	county, and in the real estate property tax records of the county treasurer.
State: Zip: +	
re preliminary non-binding estimates. The locations may be entered on t	the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
elect one of the following: X. I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be loc. CP-1 that I am filing in connection with this form; 2) if the form be	the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. (House Bill 2032), I have provided the following to the surface ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this
owner(s) of the land upon which the subject well is or will be loc	the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. (House Bill 2032), I have provided the following to the surface ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this
Select one of the following: X	the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. (House Bill 2032), I have provided the following to the surface ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this demail address. Inowledge that, because I have not provided this information, the er(s). To mitigate the additional cost of the KCC performing this fithe surface owner by filling out the top section of this form and
elect one of the following: X I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be loce CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface owner task, I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KC choosing the second option, submit payment of the \$30.00 handling fee	the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. (House Bill 2032), I have provided the following to the surface ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this demail address. Inowledge that, because I have not provided this information, the er(s). To mitigate the additional cost of the KCC performing this f the surface owner by filling out the top section of this form and CC, which is enclosed with this form.
Relect one of the following: X I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be lock CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface owner task, I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KC choosing the second option, submit payment of the \$30.00 handling fearm and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 were also second option.	the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. (House Bill 2032), I have provided the following to the surface ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this demail address. Inowledge that, because I have not provided this information, the er(s). To mitigate the additional cost of the KCC performing this if the surface owner by filling out the top section of this form and CC, which is enclosed with this form. Will be returned.
elect one of the following: X I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be lock CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface owner task, I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KC choosing the second option, submit payment of the \$30.00 handling ferm and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 in the surface owner (s).	the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. (House Bill 2032), I have provided the following to the surface ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this demail address. Inowledge that, because I have not provided this information, the er(s). To mitigate the additional cost of the KCC performing this if the surface owner by filling out the top section of this form and CC, which is enclosed with this form. Will be returned.
elect one of the following: X I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be loce CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface owner task, I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KC choosing the second option, submit payment of the \$30.00 handling ferm and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 whereby certify that the statements made herein are true and excrect to the provide that the statements made herein are true and excrect to the certification.	the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. (House Bill 2032), I have provided the following to the surface ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this demail address. Inowledge that, because I have not provided this information, the er(s). To mitigate the additional cost of the KCC performing this fithe surface owner by filling out the top section of this form and inc., which is enclosed with this form. The with this form. If the fee is not received with this form, the KSONA-1 will be returned. Manager Received Received RANSAS CORPORATION CONTINE.
Relect one of the following: X I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be loce CP-1 that I am filing in connection with this form; 2) if the form be form; and 3) my operator name, address, phone number, fax, and I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface owner task, I acknowledge that I must provide the name and address of that I am being charged a \$30.00 handling fee, payable to the KC choosing the second option, submit payment of the \$30.00 handling feem and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 whereby certify that the statements made herein are true and except to the	the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted. (House Bill 2032), I have provided the following to the surface ated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this demail address. Inowledge that, because I have not provided this information, the er(s). To mitigate the additional cost of the KCC performing this fithe surface owner by filling out the top section of this form and inc., which is enclosed with this form. The with this form. If the fee is not received with this form, the KSONA-1 will be returned.

KCC - Conservation Division, 266 N Main St, Ste 220, Wichita, KS 67202-1513

Central Life 1-3J Surface Owners Section 3-35S-43W Morton County, KS

SE/4 SE/4:

Gertrude W. Perkins Living Trust P. O. Box 86 Elkhart, KS 67950-0086

Stephenson Trust Agreement Barbara & Paul Stephenson 161 "J" Avenue Coronado, CA 92118

Jacob Thiessen 1115 Highway 56 Elkhart, KS 67950

Received
KANSAS CORPORATION COMMISSION
DEC 0 6 2016

CONSERVATION DIVISION WICHITA, KS