

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form T-1
JUL 20 2001 June 2000
Form must be Typed
Form must be Signed
All blanks must be Filled
CONSERVATION DIVISION
WICHITA, KS

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

Check Applicable Boxes:

☐ Oil Lease: No. of Wells _____ **

☒ Gas Lease: No. of Wells 1 **

** Side Two Must Be Completed.

☐ Saltwater Disposal Well - Docket No. _____

Spot Location: _____ feet from N / S Line

_____ feet from E / W Line

☐ Enhanced Recovery Project Docket No. _____

Entire Project: ☐ Yes ☐ No

Number of Injection Wells _____ **

Field Name: HUGOTON

Effective Date of Transfer: June 1, 2001

Lease Name: CARTER 1-7

C - S/2 - N/2 - SW Sec. 7 Twp. 22S R. 32 ☐ E ☒ W

Legal Description of Lease: ALL SECTION 7

County: FINNEY

Production Zone(s): CHASE

Injection Zone(s): _____

Surface Pond Permit # _____
(API # If Drill Pit)

Identify:

☐ Emergency Pit

☐ Burn Pit

☐ Storage Pit

☐ Drill Pit

Past Operator's License No. 31658 ✓

Past Operator's Name & Address: Cross Timbers Operating Co.
210 Park Avenue, Suite 2350, Oklahoma City, Ok 73102

Title: Division Administrative Manager

Contact Person: Susan L. Lilley

Phone: 405-232-4011

Date: July 20, 2001

Signature: Susan Lilley

New Operator's License No. 32864 ✓

New Operator's Name & Address: XTO Energy, Inc.
210 Park Avenue, Suite 2350

Oklahoma City, Oklahoma 73102

Title: Division Administrative Manager

Contact Person: Susan L. Lilley

Phone: 405-232-4011

Oil / Gas Purchaser: _____

Date: July 20, 2001

Signature: Susan Lilley

Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pond 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 pond permit.

_____ is acknowledged as the
new operator and may continue to inject fluids as authorized by
Docket # _____ . Recommended action: _____

Date: _____

Authorized Signature

EP&R 12/14/01 DEC 17 2001 UIC 12/14

_____ is acknowledged as the
new operator of the above named lease containing the surface pond
permitted by # _____ .

Date: _____

Authorized Signature

Must Be Filled For All Wells

* Lease Name: CARTER 1-7

* Location: SECTION 7-22S-32W

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.