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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1 March 2010 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, MUST be submitted with this form.

MOST DE SOLUTION	ed with this form.
Cas Lease: No. of Oil Wells	Effective Date of Transfer:
ield Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Injection Zone(s):
Surface Pit Permit No.: (API No. II Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	leet from
Past Operator's License No	Contact Person: LAURIE KILBRIDE Phone: 713-431-1182 Date: 05/31/2013 RECEIVED KANSAS CORPORATION COMMISSION Signature: Andrew D. Cole JUN 1 8 2013
New Operator's License No	Contact Person: BRENDA WALLER CONSERVATION DIVISION WICHITA, KS Phone: 405-319-3259 Oil / Gas Purchaser: ONEOK FIELD SERVICES Date: 05/31/2013 Signature: Douglas C. Schultze
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duty recorded in the records of the Kansas Corporation records only and does not convey any ownership interest in the	on Commission. This acknowledgment of transfer pertains to reason of
the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action:	the new operator of the above named lease containing the surface pit permitted by No.:
Date:Authorized Signature / /	Date: Authorized Signature
DISTRICT EPR	PRODUCTION
Mail to: Past Operator	C. Sterley Deam 2079 Wighita Kansas 67202

Side Two

v

Must Be Filed For All Wells

Lease Name: BOCK A			Location: 20 32 35W N\N				
Well No.	API No. (YR DRLD/PRE '67) 15189221710001 ✓	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (OlVGas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)		
2		1276FNL	1300FWL	GAS	ACTIVE		
			FEL/FWL				
		FSL/FNL					
		-					
		FSL/FNL		***************************************			
		FSL/FNL		***			
		FSL/FNL					
		FSL/FNL					
		FSUFNL					
		FSL/FNL					
		FSL/FNL					
		FSL/FNL					
		FSL/FNL					
	a. Proposition de la company d	FSL/FNL					
		FSL/FNL					
Transfer and the boundary of the second		FSL/FNL		Experience were never never to the received and the second of the received and the second of the sec			
		FSL/FNL			RECEIVED		
		FSL/FNL		К	ANSAS CORPORATION COMMISSIO		
					JUN 1 8 2013		
					CONSERVATION DIVISION WICHITA, KS		
		FSL/FNL					

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 2010 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.

OPERATOR: License # 5208	Well Location:				
Name: EXXONMOBIL OIL CORPORATION	N	Sec. 20 Twp.32 S. R. 35 Eas X West			
Address 1: P. O. BOX 4358					
Address 2:	Lease Name: BOCI	K A Well #: 2			
City: HOUSTON State: TX	Zip:	If filing a Form T-1 for multiple wells on a lease, enter the legal description of			
Contact Person: ADAM SCOTT		the lease below: T032S - R035W: SEC 020 NW4, S2, NE4			
Phone: (713 #31- 1859 Fax:	713 431-1475				
Email Address: adam.e.scott@exxonmo	ll.com				
Surface Owner Information:					
Name: See Attached	When filing a Form	T.1 involving multiple surface owners, attach an additional			
Address 1:		e information to the left for each surface owner. Surface an be tound in the records of the register of deeds for the			
Address 2:	county, and in the re	al estate property tax records of the county treasurer.			
City: State:	_ Zip:+				
owner(s) of the land upon which CP-1 that I am filing in connection form; and 3) my operator name.	nsas Surface Owner Notice Act (House Bill 2032), the subject well is or will be located: 1) a copy of the with this form; 2) if the form being filed is a Form C address, phone number, fax, and email address.	ne Form C-1, Form CB-1, Form T-1, or Form C-1 or Form CB-1, the plat(s) required by this ause I have not provided this information, the			
task, i acknowledge that i am be	s information to the surface owner(s). To mitigate thing charged a \$30.00 handling fee, payable to the K	CC, which is enclosed with this form.			
If choosing the second option, submit p form and the associated Form C-1, For	yment of the \$30.00 handling fee with this form. If CB-1, Form T-1, or Form CP-1 will be returned.	the fee is not received with this form, the KSONA-1			
I hereby certify that the statements mad	herein are true and correct to the best of my knowl	edge and belief.			
	perator or Agent:	Title:Regional Land Manager			

JUN 1 8 2013

Surface Owners

API#:	1518922	1710001	Lease Name:	BOCK	Α		Well #:
Owr	ner Name:	BOCK, ALFRADA	F TR				
	Address:	1051 260TH AVE					
	City:	BELPRE	State:	KS	Zip:	67519-1902	
Ow	ner Name: Address:						
	City:		State:		Zip:		
Owi	ner Name: Address:						
	City:		State:		Zip:		
	ner Name: Address:						
	City:		State:		Zip:		
	ner Name: Address:						
	City:		State:		Zip:		

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS