070113\_Sturdy.Fdf

#### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

March 2010 Form must be Typed Form must be \$

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

Form KSONA-1, Certification of Compliance with the Kansas Surface Owner Hotification Act, MUST be submitted with this form. Check Applicable Boxes: Oil Lease: No. of Oil Walls 7/1/2013 Effective Date of Transfer: \_\_\_ Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: \_ 219620 Gas Gathering System: Lease Name: STURDY Saltwater Disposal Well - Permit No.: .... 30 Two. NWSec 34 R. 37W | EXW \_\_feet from | N / | S Line Legal Description of Lease: \_\_ feet from 🔲 E / 🗍 W Line T0348 - R037W: SEC 028 NE4 SEC 030 N2 T0358 - R037W: \_\_ Enhanced Recovery Project Permit No.: SEC 007 SW4 Entire Project: Yes No Number of Injection Wells County: Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zone(s): CHASE \*\* Side Two Must Be Completed. Injection Zone(s):\_ Surface Pit Permit No.: feet from N / S Line of Section (API No. If Drill PR, WO or Haul) feet from E / W Line of Section Type of Pit: Emergency ☐ Burn Settling Haul-Off Workover /^ Drilling Past Operator's License No. 5208 Contact Person: \_\_LAURIE KILBRIDE RECEIVED KANSAS CORPORATION COMMISSION Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: 713-431-1182 P. O. BOX 4358, HOUSTON, TX 77210-4358 Date: 05/31/2013 RSO MANAGER/AGENT & ATTORNEY-IN-FACT CONSERVATION DIVISION Signature: Andrew D. Pole WICHITA, KS New Operator's License No. . **BRENDA WALLER** Contact Person: . New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 Phone: 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser ONEOK FIELD SERVICES OKLAHOMA CITY, OK 73102 05/31/2013 Date. Title: SR. OPERATIONS VICE PRESIDENT Signature: Douglas C. Schultze 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.: \_ **Authorized Signature** Authorized Signature DISTRICT . **PRODUCTION** Mail to: Past Operator\_

**New Operator** 

#### Must Be Filed For All Wells

' Lease Name	: STURDY	* Location: 30 34 37W N W				
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned	
13 INF		4061FSL	3983FEL	GAS	ACTIVE	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEUFWL		_	
		FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSUFNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
<del></del>		FSL/FNL	FEUFWL			
		FSL/FNL	FEL/FWL		·	
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSUFNL	FEL/FWL			
		FSL/FNL	FEL/FWL .	KANSA	RECEIVED S CORPORATION COMMISSION	
		FSL/FNL	FEI /FWI		JUN 1 8 2013	

#### A separate sheet may be attached if necessary

. FEL/FWL

\_ FEL/FWL

CONSERVATION DIVISION

WICHITA, KS

FSL/FNL \_

FSL/FNL \_\_

<sup>\*</sup> 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					
Name: EXXONMOBIL OIL CORPORATION	ON	Well Location:			
Address 1. P.O. BOY 4259					
Address 2:		County: Stevens			
City: HOUSTON State: TX		Lease Name: STURDY Well #: 1-3 INF			
Contact Person: ADAM SCOTT	_ 214	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Phone: ( 713 431- ) 654 Fax: ( 713 431-1475		T034S - R037W: SEC 028 NE4 SEC 030 N2 T035S - R037W:			
Email Address: adam.e.scott@exxonmol		SEC 007 SW4			
Surface Owner Information:					
Name: See Attached		When filing a Form T.1 imediates multiple contage comme			
Address 1:		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.			
Address 2:					
City: State:					
Select one of the following:	io iosalolis nay be emered of	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 form; and 3) my operator name, a	ure subject well is of will be k n with this form; 2) if the form t ddress, phone number, fax, at				
The same of tedah and to held allo	MONGROUP DUR SUBSEPTION	cknowledge that, because I have not provided this information, the mer(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.			
f choosing the second option, submit pay form and the associated Form C-1, Form	ment of the \$30.00 handling in CB-1, Form T-1, or Form CP-1	fee with this form. If the fee is not received with this form, the KSONA-1 will be returned.			
and the decorated room on, room	Co-i, rumi i-i, u rumi CP-i	t wis de returned.			
of choosing the second option, submit pay form and the associated Form C-1, Form thereby certify that the statements made to the bate: 6/15/2013 Signature of Options	herein are true and correct to	the best of my knowledge and belief.			

JUN 1 8 2013

### **Surface Owners**

AP#: 15189217080000	Lease Name: _	STURDY	Well #: _1_3_NF
Owner Name: RECTOR, WILLIA	AM & DEBORAH		
Address: 918 ROAD H			
City: HUGOTON	State:	KS <b>Zip:</b> 67951-5271	
Owner Name: Address:			
City:	State:	Zip:	
Owner Name: Address:			
City:	State:	Zip:	
Owner Name: Address:			
City:	State:	Zip:	
Owner Name: Address:			
City:	State:	Zip:	

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS