070113\_Wing.pdf

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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. Check Applicable Boxes: Oil Lease: No. of Oil Wells Effective Date of Transfer: \_\_\_\_7/1/2013 Gas Lease: No. of Gas Wells \_ KS Dept of Revenue Lease No.: \_ 219734 Gas Gathering System:\_ Lease Name: WING Saltwater Disposal Well - Permit No.:\_ 33 Twp, \_ \_\_feet from N/NS Line Legal Description of Lease: \_ feet from 🔲 E / 🔲 W Line T032S - R036W: SEC 033 NE4, NW4, SW4, SE4 Enhanced Recovery Project Permit No.: 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.: \_ test from N / S Line of Section (API No. II Drill Pit, WO or Haul) feet from E / W Line of Section Type of Pit: Emergency □ Bum Settling Haul-Off Workover 5208 Past Operator's License No. LAURIE KILBRIDE Contact Person: RECEIVED KANSAS CORPORATION COMMISSION Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: 713-431-1182 P. O. BOX 4358, HOUSTON, TX 77210-4358 05/31/2013 Date: RSO MANAGER/AGENT & ATTORNEY-IN-FACT Signature: Andrew D. Cole CONSERVATION DIVISION WICHITA, KS New Operator's License No. \_\_32864 **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 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.: \_\_ Date: Authorized Signature Authorized Signature DISTRICT -Mail to: Past Operator **New Operator** 

#### Side Two

#### Must Be Filed For All Wells

* Lease Name:	WING		* Location: 3	3 32 36WSW	
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet (	Section Line from South Line)	Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
1-4 INF	15189217870000	1250FSL	3943FEL	GAS	ACTIVE
		<del></del>			
		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	FEL/FWL		
		FSL/FNL	FEL/FWL		_
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSUFNL	FEL/FWL		_
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSUFNL			RECEIVED
		<del></del>	FEL/FWL	KAN:	SAS CORPORATION COMMISSION
		- FSL/FNL	FEL/FWL .		JUN 1 8 2013 —
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION WICHITAL KS

### A separate sheet may be attached if necessary

FEL/FWL

\_\_ FSL/FNL \_

<sup>&</sup>quot;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

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 #6208	_ Well Location:		
Name: EXXONMOBIL OIL CORPORATION			
Address 1: P. O. BOX 4358	County: Stevens		
Address 2:			
City: HOUSTON State: TX Zip: 77210 + 4358  Contact Person: ADAM SCOTT			
Phone: ( 713 431- 1850 Fax: ( 713 431-1475	T032S - R036W: SEC 033 NE4, NW4, SW4, SE4		
mail Address: adam.e.scott@exxonmobil.com	-		
Surface Owner Information: Jame: See Attached			
Address 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		
address 2:	county, and in the real estate property tax records of the county treasurer.		
Sity:+			
re NCC war a plat showing the predicted locations of lease roads, tal re preliminary non-binding estimates. The locations may be entered	nodic Protection Borehole Intent), you must supply the surface owners and nk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
re NCC wild a plat showing the predicted locations of lease roads, tall re preliminary non-binding estimates. The locations may be entered elect one of the following:  X I certify that, pursuant to the Kansas Surface Owner Notice	nk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Act (House Bill 2032). I have provided the following to the surface		
The NCC with a plat showing the predicted locations of lease roads, taken preliminary non-binding estimates. The locations may be entered select one of the following:    Certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form CB-1, Form T-1, or Form 1 being filed is a Form C-1 or Form CB-1, the plates) regulated by this		
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ielect one of the following:    X   Certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filling in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax,    I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface of task, I acknowledge that I am being charged a \$30.00 handling choosing the second option, submit payment of the \$30.00 handling choosing the second option, submit payment of the \$30.00 handling choosing the second option, submit payment of the \$30.00 handling choosing the second option, submit payment of the \$30.00 handling choosing the second option, submit payment of the \$30.00 handling the second option.	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form CB-1, Form CB-1, Form T-1, or Form n being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.  acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ag fee, payable to the KCC, which is enclosed with this form.		
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

JUN 1 8 2013

#### **Surface Owners**

API#: 15189217870000 Lease Name: WING Owner Name: KNOX, FLOYD & SHIRLEY ETAL Address: 200 S MADISON City: HUGOTON State: KS **Zip:** 67951-2532 **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

Well #: 1-4 INF

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS