## 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 Compilance with the Kansas Surface Owner Notification Act,
MUST be submitted with this form.

Check Applicable Boxes: MUST be submit	tled with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 7/1/2013		
X Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 200373		
Gas Gathering System:	Lease Name: BROADHURST		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line	5W Sec25 Twp26 R37W [ EX]W		
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	T026S - R037W: SEC 025 All		
Entire Project: Yes No			
Number of Injection Wells***	County: Kearny		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE		
** Side Two Must Be Completed.	Design of the control		
Old The Intel De Complete	Injection Zone(s):		
Surface Pit Permit No.:	feet from N / S Line of Section		
(API No. If Drill Pit, WO or Haul)	teet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover O P Drilling		
	UK C		
Past Operator's License No	Contact Person: LAURIE KILBRIDE RECEIVED		
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182 KANSAS CORPORATION COMMISSION		
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 JUN 1 8 2013		
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: <u>Andrew D. Cole</u> CONSERVATION DIVISION WICHITA, KS		
20004	Contact Porces: BRENDA WALLER		
New Operator's License No. 32864 ✓	Contact reison:		
New Operator's Name & Address: XTO ENERGY INC.	Phone:		
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: ONEOK FIELD SERVICES		
OKLAHOMA CITY, OK 73102	Date: 05/31/2013		
Title: SR. OPERATIONS VICE PRESIDENT	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 Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
is acknowledged as	is acknowledged as		
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:	Date:		
Authorized Signature	Authorized Signature		
DISTRICT EPR _8/12/13	PRODUCTION 8.14.13 UIC 8-13-13		
Mail to: Past Operator New Operator	or District		

#### Must Be Filed For All Wells

Lease Name:	BROADHURST	Location: 20	5 26 37W SN			
Well No.	API No. (YR DRLD/PRE '67) 15093005630000 /		Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)	
4		2440FSL	2840FEL	GAS	ACTIVE	
		FSL/FNL	FEUFWL			
		FSL/FNL	FEL/FWL		_	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		_	
		FSUFNL	FEL/FWL			
	The section of the se	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
	- <u></u>	FSL/FNL	FEL/FWL			
		FSUFNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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		FSL/FNL				
		FSL/FNL				
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION WICHITA, KS	

A separate sheet may be attached if necessary

\_\_\_FSL/FNL \_\_\_\_\_FEL/FWL \_

<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	Well Location	•
	The state of the s	SW Sec. 25 Twp.26 S. R. 37 EastX West
Address 1: P. O. BOX 4358	•	rny
Address 2:		BROADHURST Well #: 4
Crity: HOUSTON State: TX Zip:		m 1-1 for multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT		77W: SEC 025 All
Phone: ( 713 431-   850 Fax: ( 71		
Email Address: adam.e.scott@exxonmobil.com	<u>n</u>	
Surface Owner Information:		
Name: See Attached		Form 1.1 involving multiple surface owners, attach an additional
Address 1:		all of the information to the left for each surface owner. Surface action can be found in the records of the register of deeds for the
Address 2:	county, and it	n the real estate property tax records of the county treasurer.
City: State: Zip:	+	
owner(s) of the land upon which the s	ubject well is or will be located: 1) a cop	2032), I have provided the following to the surface by of the Form C-1, Form CB-1, Form T-1, or Form
	this form; 2) if the form being filed is a F ss, phone number, fax, and email addres	Form C-1 or Form CB-1, the plat(s) required by this iss.
KCC will be required to send this infor	rmation to the surface owner(s). To mitig	t, because I have not provided this information, the pate the additional cost of the KCC performing this the KCC, which is enclosed with this form.
If choosing the second option, submit paymen form and the associated Form C-1, Form CB-1		m. If the fee is not received with this form, the KSONA-1 d.
I hereby certify that the statements made here	in are true and correct to the best of my	knowledge and belief.
Date: 6/15/2013 Signature of Operato	or or Agent:	Title: Regional Land Manager
API # :15093005630000	KDOR #200373	RECEIVED KANSAS CORPORATION COMMISSION
		IIIN 1 0 2010

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

JUN 1 8 2013 CONSERVATION DIVISION

WICHITA, KS

# **Surface Owners**

API#: 1509	3005630000	Lease Name: _	BROADHURS	51	Well #: <u>4</u>	
	ne: BROADHURST					
Addre	ss: 1630 SOUTH BO	OSTON AVE.				
C	ity: TULSA	State:	OK Zip:	74119		
O Na.						
Owner Na						
Addie	<b>.</b>					
С	ity:	State:	Zip:			
Owner Nar	me:					
Addre						
c	ity:	State:	Zip:			
•	.cy.	State.	Zip.			
Owner Nan	ne.					
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C:	ty:	State:	Zip:			
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Owner Nan						
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Ci	ty:	State:	Zip:			
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JUN 1 8 2013

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