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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 Hotification Act, MUST be submitted with this form. Check Applicable Boxes: Oil Lease: No. of Oil Wells Effective Date of Transfer: ___ Gas Lease: No. of Gas Wells ____ KS Dept of Revenue Lease No.: _ Gas Gathering System:_ Lease Name: BROWN Saltwater Disposal Well - Permit No.: _ 11 Twp. 25 R. 34W _____feet from N / S Line Legal Description of Lease: __ feet from DE/DW Line Enhanced Recovery Project Permit No.: _ T025S - R034W: SEC 011 All Entire Project: Yes No Number of Injection Wells County: Finney Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zone(s): CHASE ** Side Two Must Be Completed. Injection Zone(s):_ Surface Pit Permit No.: _ leet from N / S Line of Section (API No. If Drill Pit, WO or Haul) feet from E / W Line of Section Type of Pit: Emergency Bum Settling Haul-Off Workover (5)2 Drilling Past Operator's License No. 5208 Contact Person: __LAURIE KILBRIDE Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION RECEIVED Phone: 713-431-1182 KANSAS CORPORATION COMMISSION P. O. BOX 4358, HOUSTON, TX 77210-4358 05/31/2013 JUN 1 8 2013 **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** Signature: Andrew D. Pole CONSERVATION DIVISION WICHITA, KS New Operator's License No. -**BRENDA WALLER** Contact Person: New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 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 #____ noted, approved and duty 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

New Operator

PRODUCTION _

District

DISTRICT .

Mail to: Past Operator_

Side Two

Must Be Filed For All Wells

KDOR Lease Lease Name:		· · · · · · · · · · · · · · · · · · ·	. 44	11 25 24WeW			
Cease Name:		* Location; 11 25 34WSW					
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		
35	15055213980000	1250FSL	2695FEL	GAS	ACTIVE		
							
		FSL/FNL	FEUFWL				
		FSUFNL	FEUFWL				
		FSL/FNL	FEL/FWL		_		
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
	Total .	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		-		
		FSL/FNL	FEL/FWL				
			FEL/FWL				
			FEL/FWL				
Marie Carlos Car	MANAGEMENT AND CONTRACTOR AND AND CONTRACTOR AND CO	FSLFNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
Districtive value or more constitutive y	THE TO THE MENT OF THE THE PROPERTY OF THE THE PROPERTY OF THE	FSLIFNL	FEL/FWL	. Also interpretable interpretable and expension to the second of the se	ты — фентандинана (зайтивания потиты и подобавания и поточна озведения и стада		
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL	KAN	RECEIVED SAS CORPORATION COMMISSION		
		FSL/FNL	FEL/FWL		JUN 1 8 2013		
•		FSL/FNL	FEL/FWL		CONSERVATION DIVISION		
		FSUFNL	FEL/FWL		WICHITA, KS		

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.

Select the corresponding form being t	filed: C-1 (Intent) CB-1 (Ca	MPodic Protection Borehole Intent) XT-	(Transfer) CP-1 (Plugging Application)		
OPERATOR: License #5208		Well Location:			
Name: EXXONMOBIL OIL CORPORATI			wp.25 S. R.34 Eas X Wes		
Address 1: P. O. BOX 4358	Acceptable		WP		
Address 2:			Well #: 35		
City: HOUSTON State: TX					
Contact Person: ADAM SCOTT	March I congression and the control of the control	If filing a Form T-1 for multiple wells on a lease, enter the legal descript, the lease below:			
Phone: (713 431-1-859 Fax:	713 431-1475	T025S - R034W: SEC 011 All			
Email Address: adam.e.scott@exxonmo	bil.com				
Surface Owner Information:					
Name: See Attached		When filing a Form 1.1 involving m	uitiple surface owners, attach an additiona		
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:	and the same of th	county, and in the real estate prope	the records of the register of deeds for the rty tax records of the county treasurer.		
City: State:			,		
If this form is being submitted with a For the KCC with a plat showing the predicte are preliminary non-binding estimates. T Select one of the following:	a locations of lease roads, fank h	alteries, pipelines, and electrical i	ings. The invotings chaum on the plat		
X I certify that, pursuant to the Ka owner(s) of the land upon which CP-1 that I am filing in connectio form; and 3) my operator name, a	the subject well is or will be loca n with this form; 2) if the form bei	ated: 1) a copy of the Form C-1, ing filed is a Form C-1 or Form CI	Form CR.1 Form T.1 or Form		
I have not provided this information KCC will be required to send this task, I acknowledge that I am bei	i information to the surface owner	er(s). To mitigate the additional co	ost of the KCC performing this		
If choosing the second option, submit pa form and the associated Form C-1, Form	yment of the \$30.00 handling fee CB-1, Form T-1, or Form CP-1 v	e with this form. If the fee is not i vill be returned.	eceived with this form, the KSONA-1		
hereby certify that the statements made	herein are true and correct to the	e best of my knowledge and belie	ſ.		
Date: 6/15/2013 Signature of O	perator or Agent:	McNulty Tille:	Regional Land Manager		
API # :15055213980000	KDOR #220246		RECEIVED KANSAS CORPORATION COMMISSION		

JUN 1 8 2013

Surface Owners

API#:	1505521398	80000	Lease Name: _	BROW	/N		Well #: <u>3-5</u>
Own	er Name: TR	I-STATE GENE	RATION AND TR	ANSMIS	SSION	ASSOC INC	
Address: PO BOX 33695							
	City: DEi	NVER	State:	со	Zip:	80233-0695	
	er Name:						
	Address:						
	City:		State:		Zip:		
	er Name: Address:						
	City:		State:		Zip:		
	r Name: .ddress:						
	City:		State:		Zip:		
	r Name: ddress:						
	City:		State:		Zip:		

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS