KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

070113_Brown_C_11 • Pdf
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,

Check Applicable Boxes:	itied 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.: 200377			
Gas Gathering System:	Lease Name: BROWN			
Saitwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease:			
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.:(AP! No. If Drill Pit, WO or Haul)	feet from			
	leet from E / W Line of Section			
Type of Pit: Emergency Burn Settling	Haul-Off Workover C 12 Drilling			
Past Operator's License No. 5208	Contact Person:LAURIE KILBRIDE			
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182			
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013			
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: <u>Audrew D. Cole</u>			
New Operator's License No. 32864	Contact Person: BRENDA WALLER			
	RECEIVED			
New Operator's Name & Address: XTO ENERGY INC.				
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: ONEOK FIELD SERVICES JUN 1 8 2013			
OKLAHOMA CITY, OK 73102	Date: 05/31/2013 CONSERVATION DIVISION			
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultre</u> WICHITA, KS			
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	the new operator of the above named lease containing the surface pit			
Permit No.: Recommended action:	permitted by No.:			
-	Date			
Date:	Date:			
DISTRICT EPR \$/14/13	PRODUCTION 8.15.13 UIC 8-15-13			
Mail to: Past Operator New Opera				

Side Tees

J

Must Be Filed For All Wells

KDOR Lease	9 No.:				
Lease Name: BROWN		* Location:	* Location: 11 25 34W SE		
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oi/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
3	15055006010000	2440 2640FSL	2440 2640FEL	GAS	ACTIVE
		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		
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		FSL/FNL	FEL/FWL		
			FEL/FWL		
			FEL/FWL	MANGAG	RECEIVED CORPORATION COMMISSION
		FSL/FNL	FEUFWL	KANSAS	JUN 1 8 2013
				·	ONSERVATION DIVISION
		FSL/FNL	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
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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.

5208	
OPERATOR: License # 5208 Name: EXXONMOBIL OIL CORPORATION	Well Location:
Name: EXXONMOBIL OIL CORPORATION Address 1: P. O. BOX 4358	,
	County: Finney
Address 2:	
City: 1100010N State: 1x Zip: 77210 + 4300 Contact Person: ADAM SCOTT	—— If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Phone: (713 431-1/859 Fax: (713 431-1475	T025S - R034W: SEC 011 All
Email Address: adam.e.scott@exxonmobil.com	
Surface Owner Information:	
Name: 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:	
City: State: Zip:+	
Select one of the following:	
owner(s) of the land upon which the subject well is or will CP-1 that I am filing in connection with this form; 2) if the fi form; and 3) my operator name, address, phone number, f	tice Act (House Bill 2032), I have provided the following to the surface if be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form form being filed is a Form C-1 or Form CB-1, the plat(s) required by this fax, and email address. s). I acknowledge that, because I have not provided this information, the
KCC will be required to send this information to the surface	ce owner(s). To mitigate the additional cost of the KCC performing this ndling fee, payable to the KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 ham form and the associated Form C-1, Form CB-1, Form T-1, or Form	ndling fee with this form. If the fee is not received with this form, the KSONA-1 in CP-1 will be returned.
hereby certify that the statements made herein are true and corre	ect to the best of my knowledge and belief.
Date: 6/15/2013 Signature of Operator or Agent: "W. 7/	Michael McNulty Title: Regional Land Manager
API # :15055006010000 KDOR #200	RECEIVED WANSAS CORPORATION COMMISSION

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

Surface Owners

AP# : 15	5055006010000	Lease Name: _	BROWN		Well #:3
	Name: TRI-STATE GI	ENERATION AND TR	ANSMISSION	ASSOC INC	
	City: DENVER	State:	CO Zip:	80233-0695	
Owner	Name: dress:				
	City:	State:	Zip:		
Owner i	Name: dress:				
	City:	State:	Zip:		
Owner N	lame: Iress:				
Add	City:	State:	Zip:		
Owner N					
	ress: City:	State:	Zip:		

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS