### 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 Notification Act. MUST be submitted with this form. Check Applicable Boxes: ☐ Oil Lease: No. of Oil Wells \_ 7/1/2013 Effective Date of Transfer: Gas Lease: No. of Gas Wells \_\_\_\_ KS Dept of Revenue Lease No.: , 221443 Gas Gathering System:\_ Lease Name: BROWN FARM Saltwater Disposal Well - Permit No.: \_\_ 27 Twp. 25 R. 34W FXW \_ N W Sec. Legal Description of Lease: \_\_ feet from 🔲 E / 🔲 W Line T025S - R034W: SEC 027 All ☐ Enhanced Recovery Project Permit No.: \_ 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.: \_ \_ feet 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 10 2 Drilling Past Operator's License No. 5208 Contact Person: \_ LAURIE KILBRIDE Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: \_713-431-1182 RECEIVED KANSAS CORPORATION COMMISSION P. O. BOX 4358, HOUSTON, TX 77210-4358 Date: 05/31/2013 **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** Signature: <u>Andrew D. Cole</u> ONSERVATION 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 #\_\_\_\_\_ 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 \_\_\_\_\_ . 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

	V
KDOR Lease No.: 2	221443

* Lease Name: Well No.	API No. (YR DRLD/PRE '67)	* Location: 27 25 34W:/// W/					
		Foolage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)		
		660FNL	1750FWL	GAS	ACTIVE		
			FEL/FWL				
		FSL/FNL	FEL/FWL				
~			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	KANS	AS CORPORATION COMMISSION		
		FSL/FNL	FEL/FWL		JUN 1 8 2013		
		EQL/ENI	CCI /CIA/I		CONSERVATION DIVISION WICHITA, KS		

A separate sheet may be attached if necessary

<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 http://dib 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:			
Name: EXXONMOBIL OIL CORPORATION				
Address 1: P. O. BOX 4358	County: <u>Finney</u>			
Address 2:				
City: HOUSTON State: TX Zip: 77210 + 4358	and a second of the second of			
Contact Person: ADAM SCOTT	the lease below: T025S - R034W: SEC 027 All			
Phone: ( 713 431-1/854 Fax: ( 713 431-1475	——————————————————————————————————————			
Email Address: adam.e.scott@exxonmobil.com				
Surface Owner Information:				
Name: See Attached	When filing a Form T-1 involving multiple surface owners, attach an additional			
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.			
City:				
Select one of the following:	red on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
CP-1 that I am filing in connection with this form; 2) if the form; and 3) my operator name, address, phone number, form; and the provided this information to the surface owner(s) KCC will be required to send this information to the surface.	i. I acknowledge that, because I have not provided this information, the			
task, I acknowledge that I am being charged a \$30.00 hand	dling fee, payable to the KCC, which is enclosed with this form.			
f choosing the second option, submit payment of the \$30.00 hand form and the associated Form C-1, Form CB-1, Form T-1, or Form	tling fee with this form. If the fee is not received with this form, the KSONA-1 CP-1 will be returned.			
hereby certify that the statements made herein are true and corre	ct to the best of my knowledge and belief.			
Date: 6/15/2013 Signature of Operator or Agent:	Title: Regional Land Manager			
API # :15055214980001 KDOR #2214	143 RECEIVED			

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

JUN 1 8 2013

KANSAS CORPORATION COMMISSION

### **Surface Owners**

API#:	15055214980001	Lease Name:	BROWN FARM		Well #:1113				
Owner Name: J O CATTLE COMPANY INC									
	Address: PO BOX 7								
	City: HOLCOMB	State:	KS Zip:	67851-0007					
Own	er Name:								
ı	Address:								
	City:	State:	Zip:						
	er Name: Address:								
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	City:	State:	Zip:						

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS