## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

March 2010 Form must be Typed Form must be Sign All blanks must be Fille

## **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.: Gas Gathering System: Lease Name: BROWN Saltwater Disposal Well - Permit No.: ... 21 Twp. 25 R. 34W . NE Sec. \_\_\_\_\_feet from N/ S Line Legal Description of Lease: \_\_ feet from 🔲 E / 🗍 W Line T025S - R034W: SEC 021 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) leet from F / W Line of Section Type of Pit: ☐ Burn Emergency Settling Haul-Off Workover ( Drilling 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 JUN 1 8 2013 Title: 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 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. Schultre Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #..... 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 \_\_\_. Recommended action: \_ permitted by No.: \_ Date: **Authorized Signature** Authorized Signature DISTRICT. PRODUCTION Mail to: Past Operator\_

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

District

**New Operator** 

### Side Two

Lease Name	: BROWN	* Location: 21 25 34W /V E						
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oll/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned			
24	15055006110000	2840FSL	2440FEL	GAS	ACTIVE			
		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	·				
		FSL/FNL	FEL/FWL					
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**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 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:				
Name: EXXONMOBIL OIL CORPORAT	FION		Twp.25 S. R.34 Eas X West			
Address 1:P. O. BOX 4358	and the second s	County: Finney	Eas X West			
Address 2:		•	Well #: 24			
City: HOUSTON State: TX						
Contact Person: ADAM SCOTT		If filing a Form 1-1 for multiple welts on a lease, enter the legal describe lease below;				
Phone: ( 713 431-1 } € 59 Fax	x: ( 713 431-1475	T025S - R034W: SEC 021 All				
Email Address: <u>adam.e.scott@exxonm</u>	obil.com					
Surface Owner Information:						
Name: See Attached	The state of the s	When filing a Form 1.1 impolaines	een deinster veradiscor curamani			
Address 1:		When filing a Form 1.1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface				
Address 2:		owner information can be found it	n the records of the register of deeds for the perty tax records of the county freasurer.			
Oily: State:		, ,	the state of the section of the sect			
			nu must supply the surface owners and lilines. The locations shown on the plat			
Select one of the following:		eronin C-1 piat, Form CB-1 pia	l lines. The locations shown on the plat at, or a separate plat may be submitted.			
ielect one of the following:  X I certify that, pursuant to the Kaowner(s) of the land upon which CP-1 that I am filling in connection		House Bill 2032), I have provied: 1) a copy of the Form C-1,	ded the following to the surface			
ielect one of the following:  X I certify that, pursuant to the Kaowner(s) of the land upon which CP-1 that I am filing in connection form; and 3) my operator name.  I have not provided this information of the KCC will be required to send this	ansas Surface Owner Notice Act (i ) the subject well is or will be locat on with this form: 2) if the form bein	House Bill 2032), I have provied: 1) a copy of the Form C-1, g filed is a Form C-1 or Form C mail address.	ded the following to the surface, Form CB-1, Form T-1, or Form CB-1, the plat(s) required by this			
ielect one of the following:  X I certify that, pursuant to the Kaowner(s) of the land upon which CP-1 that I am filing in connection form; and 3) my operator name.  I have not provided this information KCC will be required to send this task, I acknowledge that I am be choosing the second option, submit name.	ensas Surface Owner Notice Act (in the subject well is or will be located on with this form; 2) if the form being address, phone number, fax, and elements to the surface owner(s). If acknown information to the surface owners ing charged a \$30.00 handling fee,	House Bill 2032), I have provied: 1) a copy of the Form C-1, g filed is a Form C-1 or Form C mail address.  I will address the additional of the payable to the KCC, which is	ded the following to the surface, Form CB-1, Form T-1, or Form CB-1, the plat(s) required by this not provided this information, the cost of the KCC performing this 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

CONSERVATION DIVISION WICHITA, KS

## **Surface Owners**

API#:_	15055006110000	_ Lease Name: _	BROWN		Well #: _24	
O1440	er Nomer I O OATTI E oo	•••				
	er Name: J O CATTLE Co Address: PO BOX 7	OMPANY INC				
	City: HOLCOMB	State:	KS Zip:	67851-0007		
	er Name:					
	Address:					
	City:	State:	Zip:	:		
	r Name: .ddress:					
	City:	State:	Zip:			
	Name:					
Ac	ddress: City:	State:	Zip:			
Owner Ad	Name: dress:					
	City:	State:	Zip:			

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