070113_Bunton.pdf

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 7-1 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 KBONA-1, Certification of Compliance with the Kaneas Surface Owner Notification Act,

Check Applicable Boxes: MUST be submi	itted 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.: 220755		
Gas Gathering System:	Lease Name: BUNTON		
Saltwater Disposal Well - Permit No.:	NE sec. 9 Twp. 32 R. 36W EXW		
Spot Location:feet from N / S Line			
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	T0328 - R036W: SEC 009 NE4, NW4, SW4, SE4		
Entire Project: Yes No			
Number of Injection Wells**	County: Stevens Production Zone(s): CHASE		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE			
- Stds TWC Busi So Completed	Injection Zone(s):		
Surface Pit Permit No.: (API No. II Drill Pit, WO or Heal) Type of Pit: Emergency Burn Settling			
Type of Pit: Emergency Burn Settling			
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 RECEIVED KANSAS CORPORATION COMMISSION Signature: Andrew D. Cale		
TIME. RSO MANAGER/AGENT & ATTORNEY-IN-FACT			
Title: RSO MARAGERIAGERI & ATTORNETINE AST	JUN 1 8 2013		
New Operator's License No. 32864 V	Contact Person: BRENDA WALLER CONSERVATION DIVISION WICHITA, KS		
New Operator's Name & Address: XTO ENERGY INC.	Phone:405-319-3259		
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 duly recorded in the records of the Kaneas Corporation Commission records only and does not convey any ownership interest in the	n 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	PRODUCTION 8.1.13 UIC 8-1-13		
Mail to: Past Operator New Open	ator District		

State Teac

Must Be Filed For All Wells

	✓	
KDOR Lease No.:	220765	
LANCOLL FRAGO LANCO		

* Lease Name:	BUNTON	- Location: 9 32 36W/NE				
Well No.	API No. (YR DRLD/PRE '67)	Footage from \$ (i.e. FSL = Feet from \$	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)	
1-4	15189220130001	1250FNL	1450FEL	GAS	ACTIVE	
		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			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	MAG 450 VAN POTENCIA DE LA CAMBRIA DE LA CAM		
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		FSL/FNL	FEL/FWL		RECEIVED	
		FSL/FNL	FEL/FWL	KANSAS	S CORPORATION COMMISSION	
	· · · · · · · · · · · · · · · · · · ·	FSL/FNL	FEL/FWL		JUN 1 8 2013	
	-	FSL/FNL	FEL/FWL		CONSERVATION DIVISION 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.

OPERATOR: License #	Well Lo	cation:		
Name: EXXONMOBIL OIL CORPORATI	ION	NE Sec. 9 Twp.32 S. R. 36 Eas X West		
Address 1: P. O. BOX 4358		Stevens		
Address 2:	Lease	Name: BUNTON Well #: 1-4		
City: HOUSTON State: TX	Zip: 77210 + 4358 If filing	a Form T-1 for multiple wells on a lease, enter the legal description of		
Contact Person: ADAM SCOTT	T0000	the lease below: T032S - R036W: SEC 009 NE4, NW4, SW4, SE4		
Phone: (713 /431 1859 Fax	:: (<u>713_431-1475</u>	- NUSON: SEC 008 NE4, NN4, SN4, SE4		
Email Address: <u>adam.e.scott@exxonmo</u>	obil.com			
Surface Owner Information:				
Name: See Attached		lling a Form T-1 involving multiple surface owners, attach an additional		
Address 1:		sting all of the information to the left for each surface owner. Surface information can be found in the records of the register of deeds for the		
Address 2:		and in the real estate property tax records of the county treasurer.		
City: State:	Zip:+			
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<u>_</u>				
X I certify that, pursuant to the Ka owner(s) of the land upon which CP-1 that I am filing in connection	h the subject well is or will be located: 1) a	Bill 2032), I have provided the following to the surface a copy of the Form C-1, Form CB-1, Form T-1, or Form is a Form C-1 or Form CB-1, the plat(s) required by this ddress.		
I certify that, pursuant to the Ka owner(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 the	h the subject well is or will be located: 1) a on with this form; 2) if the form being filed i address, phone number, fax, and email ad tion to the surface owner(s). I acknowledg is information to the surface owner(s). To	a copy of the Form C-1, Form CB-1, Form T-1, or Form is a Form C-1 or Form CB-1, the plat(s) required by this		
I certify that, pursuant to the Kaowner(s) of the land upon which CP-1 that I am filing in connecto form; and 3) my operator name. I have not provided this informati KCC will be required to send this task, I acknowledge that I am be	h the subject well is or will be located: 1) a on with this form; 2) if the form being filed in address, phone number, fax, and email action to the surface owner(s). I acknowledght is information to the surface owner(s). To eing charged a \$30.00 handling fee, payab	a copy of the Form C-1, Form CB-1, Form T-1, or Form is a Form C-1 or Form CB-1, the plat(s) required by this ddress. e that, because I have not provided this information, the mitigate the additional cost of the KCC performing this le to the KCC, which is enclosed with this form. is form. If the fee is not received with this form, the KSONA-1		
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 form and the associated Form C-1, Formation in the second option, submit perform and the associated Form C-1, Formation in the second option of the second option	In the subject well is or will be located: 1) a on with this form; 2) if the form being filed in address, phone number, fax, and email action to the surface owner(s). I acknowledght is information to the surface owner(s). To eing charged a \$30.00 handling fee, payable ayment of the \$30.00 handling fee with the	a copy of the Form C-1, Form CB-1, Form T-1, or Form is a Form C-1 or Form CB-1, the plat(s) required by this ddress. e that, because I have not provided this information, the mitigate the additional cost of the KCC performing this le to the KCC, which is enclosed with this form. is form. If the fee is not received with this form, the KSONA-1 turned.		
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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

AP#:	15189220130001	Lease Name: _	BUNTON		Well #: _1-4		
Own	Owner Name: LEE, BETTY						
	Address: 206 S WASHING	TON					
	City: HUGOTON	State:	KS Zip:	67951-2540			
Owi	ner Name:						
	Address:						
	City:	State:	Zip	:			
	ner Name: Address:						
	City:	State:	Zip:				
	er Name: Address:						
	City:	State:	Zip:				
	er Name: Address:						
	City:	State:	Zip:				

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS