### 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, Check Applicable Boxes: MUST be submitted with this form. Oil Lease: No. of Oil Wells Effective Date of Transfer-Gas Lease: No. of Gas Wells 207319 KS Dept of Revenue Lease No.: Gas Gathering System:. Lease Name: (EOG) CLAIR CURRY Saltwater Disposal Well - Permit No.: \_\_\_ 26 R. \_ feet from 🗌 N / 🦳 S Line ... feet from 🔲 E / 🔲 W Line Legal Description of Lease: Enhanced Recovery Project Permit No.: T026S - R035W: SEC 020 All Entire Project: Yes No Number of Injection Wells County: Kearny Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zone(s): COUNCIL GROVE \*\* 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 Burn Settling Haul-Off Workover AP Drilling Past Operator's License No. 5208 \ **LAURIE KILBRIDE** Contact Person: Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: 713-431-1182 P. O. BOX 4358, HOUSTON, TX 77210-4358 05/31/2013 Date: \_\_\_ Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT Signature: <u>Audrew D. Cole</u> New Operator's License No. 32864 **BRENDA WALLER** Contact Person: . New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 RECEIVED 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: WGP-KHC LLC KANSAS CORPORATION COMMISSION **OKLAHOMA CITY, OK 73102** 05/31/2013 Title: SR. OPERATIONS VICE PRESIDENT Signature: Douglas C. Schultre CONSERVATION DIVISION WICHITA, KS Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #.... has been 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 DISTRICT \_ PRODUCTION

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

**New Operator** 

Mail to: Past Operator

#### Side Two

#### Must Be Filed For All Wells

Lease Name: (EOG) CLAIR CURRY				Location; 29 26 35W N W			
Well No.	API No. (YR DRLD/PRE '67) 15093206080000	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned		
2		2520FNL	2310FWL	GAS	ACTIVE		
		FSL/FNL	FEUFWL				
		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				
<del></del>		FSL/FNL	FEL/FWL				
		FSL/FNL	FEUFWL				
		FSL/FNL	FEL/FWL				
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#### A separate sheet may be attached if necessary

\_\_\_ FEL/FWL

\_\_\_ FEL/FWL

FSL/FNL \_

FSL/FNL \_

JUN 1 8 2013

CONSERVATION DIVISION

WICHITA, KS

<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 háy 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		
Name: EXXONMOBIL OIL CORPORATION	Well Location:	
Address 1:P. O. BOX 4358		Twp.26 S. R.35 Eas X West
Address 2:		
City: HOUSTON State: TX Zip: 772	40 . 4950	RRY Well #: 2
Contact Person: ADAM SCOTT	If filing a Form 1-1 for multiple we the lease below:	alls on a lease, enter the legal description of
Phone: ( 713 431 1654 Fax: ( 713 431-1		
Email Address: adam.e.scott@exxonmobil.com		
Surface Owner Information:		
Name: See Attached	Milyan Bloom of Comm. T. 4 to 11	and defined
Address 1:	sheet listing all of the information	nultiple surface owners, attach an additional to the left for each surface owner. Surface
Address 2:	owner information can be found in	the records of the register of deeds for the error tax records of the county treasurer.
City: State: Zip:		erry tan records of the county weasures.
are preliminary non-binding estimates. The locations m Select one of the following:	us de emereu on me roi m C-1 plat, Form CB-1 pla	it, or a separate plat may be submitted.
form; and 3) my operator name, address, phone  I have not provided this information to the surface KCC will be required to send this information to	It 2) if the form being fled is a Form C 1 or Form C	Form CB-1, Form T-1, or Form CB-1, the plat(s) required by this of provided this information, the
choosing the second option, submit payment of the \$ rm and the associated Form C-1, Form CB-1. Form T	\$30.00 handling fee with this form. If the fee is not. -1, or Form CP-1 will be returned.	received with this form, the KSONA-1
nereby certify that the statements made herein are true	e and correct to the best of my knowledge and beli	ef.
ate: 6/15/2013 Signature of Operator or Agent	M. Michael McNulty Title:	Regional Land Manager
API # :15093206080000	KDOR #207319	RECEIVED KANSAS CORPORATION COMMISSIO

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

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CONSERVATION DIVISION WICHITA, KS

### **Surface Owners**

API#:	15093206080000	Lease Name: _	(EOG) CLAII	R CURRY	Well #: _2	
	er Name: SMITH, BRYAN K Address: 10450 N RD S City: ULYSSES	State:	KS Zip:	67880		
	er Name: Address: City:	State:	Zip:			
	or Name: Address; City:	State:	Zip:			
	<sup>,</sup> Name: ddress: City:	State:	Zip:			
	Name: Idress: City:	State:	Zip:			

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013