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 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-Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: 202790 Gas Gathering System: Lease Name: E E MANGELS Saltwater Disposal Well - Permit No.: ___ 33 _____feet from N/ S Line Legal Description of Lease: ____ teel from 🔲 E / 🔲 W Line T033S - R039W: SEC 017 SE4 SEC 020 NE4, SE4 SEC 021 Enhanced Recovery Project Permit No.:_ SW4 Entire Project: Yes No Number of Injection Wells County: Morton Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zone(s): CHASE ** Side Two Must Be Completed. Injection Zone(s):_ Surface Pit Permit No.: leet from N / S Line of Section (API No. II Drill Pit, WO or Haul) feet from E / W Line of Section Type of Pit: Emergency Burn Settling Haul-Off Workover F Past Operator's License No. 5208 > **LAURIE KILBRIDE** Contact Person: _ RECEIVED Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: 713-431-1182 KANSAS CORPORATION COMMISSION 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** New Operator's License No. -**BRENDA WALLER** Contact Person: New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 210 PARK AVENUE, SUITE 2360 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 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

New Operator

Mail to: Past Operator_

M

Must Be Filed For All Wells

* Lease Name:	E E MANGELS		*Location: 20 33 39W NE				
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fi	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)		
1		3960FSL	1320FEL	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				
		FSL/FNL	FEL/F W L				
		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	-			
		FSL/FNL					
			FEU/FWL				
		FSL/FNL	FEL/FWL		RECEIVED SAS CORPORATION COMMISSION		
		FSL/FNL	FEL/FWL	KANS	IUN 1 8 2013		
		FSL/FNL	FEL/FWL				
		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 #	5208	Monto	
Name: EXXONMOBIL C	DIL CORPORATION		
Address 1: P.O. BOX 43	58		Morton East Nest
			ame: E E MANGELS Well #: 1
	State: Zip:	4070	Form 1-1 for multiple wells on a lease, enter the legal description of
Contact Person: ADAM SC	οπ	the leas	e below:
Phone: (713 431-1185	Fax: (713 431-1	175 T033S	R039W: SEC 017 SE4 SEC 020 NE4, SE4 SEC 021
Email Address: adam.e.s	cott@exxonmobil.com		
Surface Owner Information	7:		
Name: See Attache	d	When fil	ng a Form T.1 involving multiple surface owners, attach an additional
Address 1:		sheet lis	ing all of the information to the left for each surface owner. Surface formation can be found in the records of the register of deeds for the
Address 2:	and the second s	county, a	nd in the real estate property tax records of the county treasurer.
City:	State: Zip:	+	
Select one of the following		ay be emered diruler or in	C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
CP-1 that I am filing form; and 3) my op	to upon which the subject wi ig in connection with this form perator name, address, phono I this information to the surface ed to send this information to	all is or will be located: 1) a c; 2) if the form being filed is c number, fax, and email ad ce owner(s). I acknowledge the surface owner(s). To i	till 2032), I have provided the following to the surface copy of the Form C-1, Form CB-1, Form T-1, or Form a Form C-1 or Form CB-1, the plat(s) required by this dress. that, because I have not provided this information, the nitigate the additional cost of the KCC performing this to the KCC, which is enclosed with this form.
If choosing the second op form and the associated F	tion, submit payment of the \$ orm C-1, Form CB-1, Form T	30.00 handling fee with this 1, or Form CP-1 will be retu	form. If the fee is not received with this form, the KSONA-1 med.
hereby certify that the sta	tements made herein are tru	e and correct to the best of	ny knowledge and belief.
Date: 6/15/2013	. Signature of Operator or Agent	M. Michael McNutry	Title: Regional Land Manager
API # :1512900214000	· 0	KDOR #202790	RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

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

CONSERVATION DIVISION WICHITA, KS

Surface Owners

API#: 15129002140000

	Name: LINK idress: PO B	, WILLARD S, F	AM TR UAD &	LINK,	GENEV	EVE
A	iaress: PO B	OX 97				
	City: ROLL	.A	State:	KS	Zip:	67954
Owner	· Name:					
	ddress:					
	City:		State:		Zip:	
	Name: idress:					
	City:		State:		Zip:	
Owner	Name:					
Ad	dress:					
	City:		State:		Zip:	
Owner	Namai					
	name: dress:					
	Citv:		State:		Zin:	

Lease Name: E E MANGELS

RECEIVED KANSAS CORPORATION COMMISSION

_ Well #: <u>1</u>_____

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS