070113_McCoy_25.pdf

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

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 subm	nitted with this form.
Oil Lease: No. of Oil Wells	Effective Date of Transfer: 7/1/2013
Gas Lease: No. of Gas Wells1	KS Dept of Revenue Lease No.: 208468
Gas Gathering System:	Lease Name: MCCOY
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	N_W_Sec25 Twp25 R34W E XW
feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T025S - R034W: SEC 025 All
Entire Project: Yes No	
Number of Injection Wells **	County: Finney
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.: (API No. II Drill Pit, WO or Haul)	leet from N / S Line of Section
	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover Of Drilling
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
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	RECEIVED
IND:	Signature: <u>Andrew D. Cole</u> KANSAS CORPORATION COMMISSION
	JUN 1-8-2013
New Operator's License No. 32864 V	Contact Person: BRENDA WALLER CONSERVATION DIVISION
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259 WICHITA, KS
210 PARK AVENUE, SUITE 2360	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 duty recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation 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
Permit No.: Recommended action:	permitted by No.:
Date:	Date:
Authorized Signature	Date:
DISTRICT EPR EPR EPR EPR	PRODUCTION 8.16.13 UIC 8-16-13
Mail to: Past Operator New Operati	

Side Two

Must Be Filed For All Wells

		V
KDOR Lassa Na	208468	

* Lease Name:	MCCOY	* Location: 25 25 34W N W				
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet f	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned	
34	15055204510000 /	2240FNL	2440FWL	GAS	ACTIVE	
		FSL/FNL	FEUFWL			
		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/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/FNIL	FEL/FWL			
		FSL/FNL	FEL/FWL	-		
		- FSL/FNL .	FEL/FWL _	KAN	RECEIVED SAS CORPORATION COMMISSION	
		FSL/FNL	FEL/FWL _		JUN 1 8 2013	
					CONSERVATION DIVISION	
			FEL/FWL _		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.

	5208	MENT
Name: EXXONMOBIL	OIL CORPORATION	_ Well Location:
Address 1: P.O. BOX	1358	C Flance
		County: <u>rinney</u> Lease Name: <u>MCCOY</u> Well #: 3-4
City: HOUSTON	State: _TX _ Zip:77210 ++4358	170 I 7 . 3-4
Contact Person: ADAM S	СОТТ	the lease below:
	9 Fax: (713 431-1475	T025S - R034W: SEC 025 All
Email Address: <u>adam.e</u>	.scott@exxonmobil.com	-
Surface Owner Informati	on:	
lame: See Attach	ed	Miles filters a Core T t implication and the
		sheet listing all of the information to the left for each surface gures. Surface
		TOWNER INTO COUNTY OF A STATE OF THE COUNTY
	State: Zip:+	
elect one of the following		on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
CP-1 that I am fill		Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form a being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.
		acknowledge that, because I have not provided this information, the wner(s). To mitigate the additional cost of the KCC performing this g fee, payable to the KCC, which is enclosed with this form.
Iask, i acknowled		
choosing the second or		g fee with this form. If the fee is not received with this form, the KSONA-1 2-1 will be returned.
choosing the second op rm and the associated f	otion. Submit navment of the \$20.00 hamilim	- i wii be returned.
choosing the second operm and the associated for the state of the stat	ntion, submit payment of the \$30.00 handling form C-1, Form CB-1, Form T-1, or Form CP atements made herein are true and correct to	- i wii be returned.

CO

CONSERVATION DIVISION WICHITA, KS

JUN 1 8 2013

Surface Owners

API#:	15055204510000	Lease Name: _	MCCOY		Well #: <u>3-4</u>	
	er Name: WHEATLAND EL Address: PO BOX 1078 City: GARDEN CITY	ECTRIC COOPER State:		67846-1078		
	er Name: Address: City:	State:	Zip:			
	or Name: Address: City:	State:	Zip:			
	r Name: ddress: City:	State:	Zip:			
	Name: Idress: City:	State:	Zip:			

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013