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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 1-1 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,

Cheek Applicable Royes	ted with this form.			
Check Applicable Boxes: 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.: 202796			
Gas Gathering System:	Lease Name: MINGENBACK			
Saltwater Disposal Well - Permit No.:				
Spot Location: feet from N / S Line				
feet from E / W Line	Legal Description of Lease:			
Enhanced Recovery Project Permit No.:	T035S - R039W: SEC 006 N2 NE4, NE4 NW4 (NWNW) SEC 007 E2 SW4 (NWSW) (SWSW) SEC 018 E2 SW4 (NWSW)			
Entire Project: Yes No	(SWSW)T035S - R040W: SEC 013 NE4 County: Morton			
Number of Injection Wells**				
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE			
** Side Two Must Be Completed.	Injection Zone(s):			
Surface Pit Permit No.:(API No. If Drill Pit, WO or Heul)	leet from N / S Line ol Section			
,	leet from E / W Line of Section			
Type of Pit: Emergency Bum Settling	Haul-Off Workover OR Drilling			
Past Operator's License No. 5208	Contact Person: LAURIE KILBRIDE RECEIVED			
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182 KANSAS CORPORATION COMMISSION			
P. O. BOX 4358, HOUSTON, TX 77210-4358	05/24/2042 ILIN 1 9 2012			
Title: _RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: <u>Andrew D. Cole</u> CONSERVATION DIVISION WICHITA, KS			
New Operator's License No	Contact Person: BRENDA WALLER			
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259			
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: ONEOK FIELD SERVICES			
	05/24/2042			
OKLAHOMA CITY, OK 73102	Vale.			
Title: SR. OPERATIONS VICE PRESIDENT	Signature: Douglas C. Schultze			
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 Iluids as authorized by	the new operator of the above named lease containing the surface pit			
,	•			
Permit No.: Recommended action:	permitted by No.:			
Date	Date:			
Date:	Authorized Signature			
DISTRICT EPR 8/20/13	PRODUCTION 8-21-13 UIC 8-21-13			
Mail to: Past Operator New Operat				

Side Two

Must Be Filed For All Wells

	No.:					
Lease Name:	9: MINGENDACK Location:					
₩eil No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
1	15129004450000 /	1320FSL	1320FWL	GAS	ACTIVE	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	-4		
		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			
			FEL/FWL			
		FSL/FNI	FEL/FWL			
<u></u>		FSL/FNI				
		FSL/FNI				
	PROPERTY OF THE PROPERTY OF TH	FSL/FNI				
		FSL/FN	-		RECEIVED	
				KAN	NSAS CORPORATION COMMISSION	
			_		JUN 1 8 2013	
		FSL/FN			CONSERVATION DIVISION WICHITA, KS	
		FSL/FN	LFEL/FWI			

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.

Select the corresponding form being filed: C-1 (Intent) CB-1	(Cathodic Protection Boxehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 5208	Well Location:SW Sec.7 Twp.35 S. R.39 Eas X West		
Name: EXXONMOBIL OIL CORPORATION	County: Morton		
Address 1: P. O. BOX 4358	Lease Name: MINGENBACK Well #: 1		
Address 2:			
City: HOUSTON State: TX Zip: 77210 + 4358	If filing a Form 1-1 for multiple wells on a lease, enter the legal description of the lease below: T035S - R039W: SEC 006 N2 NE4, NE4 NW4 (NWNW) SEC		
Contact Person: ADAM SCOTT			
Phone: (713 431-1859 Fax: (713 431-1475	007 E2 SW4 (NWSW) (SWSW) SEC 018 E2 SW4 (NWSW) (SWSW)T035S - R040W: SEC 013 NE4		
Email Address: adam.e.scott@exxonmobil.com	(SMSM) 10303 - R040M. SEC 013 RE4		
Surface Owner Information:			
Name: See Attached	When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface		
Address 1:	owner information can be tound in the records of the register of deeds for the		
Address 2:	county, and in the real estate property tax records of the county treasurer.		
City: State: Zip:+			
owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax. I have not provided this information to the surface owner(s). KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 handling.	acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ng fee, payable to the KCC, which is enclosed with this form.		
If choosing the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form C thereby certify that the statements made herein are true and correct			
W Miz	had Minutty Title: Regional Land Manager		
Date: 6/15/2013 Signature of Operator or Agent:	RECEIVED KANSAS CORPORATION COMMISSIO		
AF1# .101200770000	JUN 1 8 2013		

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

CONSERVATION DIVISION WICHITA, KS

Surface Owners

API#: 15129004450000	Lease Name: MINGENBACK	Well #: _1					
Owner Name: MCCLUNG LAND CO, LLC ELKHART FARMS, INC; KO FARMS Address: P O BOX 427							
City: ELKHART	State: KS Zip: 679	50-0427					
Owner Name: Address:	State: Zip:						
City:	State: Zip.						
Owner Name: Address:							
City:	State: Zip:						
Owner Name: Address:							
City:	State: Zip:						
Owner Name: Address:							
City:	State: Zip:						

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS