070113_Salley.pdf

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, MUST be submitted with this form. Check Applicable Boxes: Oil Lease: No. of Oil Wells 7/1/2013 Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: Gas Gathering System:. Lease Name: SALLEY Saltwater Disposal Well - Permit No.: ___ 16 Twp. 33 R. 35W FEXW __feet from N / S Line Legal Description of Lease: _ feet from \square E / \square W Line T033S - R035W: SEC 016 Ail Enhanced Recovery Project Permit No.: __ Entire Project: Yes No Number of Injection Walls County: Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zone(s): CHASE ** 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 (か Drilling 5208 Past Operator's License No. **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: **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** Signature: __Andrew D. Cole RECEIVED KANSAS CORPORATION COMMISSION New Operator's License No. 32864 **BRENDA WALLER** Contact Person: JUN 1-8-2013 New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 BONGERVATION DIVISION 210 PARK AVENUE, SUITE 2350 WICHITA, KS 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 #___ 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 Permit No -..... . Recommended action: permitted by No.: ___ Date: Authorized Signature Authorized Signature DISTRICT. **PRODUCTION** Mail to: Past Operator ... New Operator District

Side Two

Must Be Filed For All Wells

Lease Name	SALLEY	* Location: 16 33 35W(V) W				
Well 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	
23 INF		660FNL	660FWL	GAS	ACTIVE	
		FSL/FNL	FEUFWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL			
·	111111111111111111111111111111111111111	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
-		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		F\$L/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		RECEIVED	

A separate sheet may be attached if necessary

____ FEL/FWL

_ FEL/FWL

_ FEL/FWL

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

_ FSL/FNL _

_FSL/FNL _

____FSL/FNL _

^{*} 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 Borehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License #5208	
Name: EXXONMOBIL OIL CORPORATION	
Address 1: P. O. BOX 4358	
Address 2:	
City: HOUSTON State: TX Zip: 77210 ++	1000
Contact Person: ADAM SCOTT	4358 If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:
Phone: (713 431-1850 Fax: (713 431-1475	T033S - R035W: SEC 016 All
Email Address: adam.e.scott@exxonmobil.com	
Surface Owner Information:	
Name: See Attached	When filing a Form T.1 involving multiple surface owners, attach an additional
Address 1:	sheet listing all of the information to the left for each surface owner. Surface
Address 2:	OWNER HIJOTHERION Can be found in the records of the register of deeds for the
City: State: Zip:+	· · · · · · · · · · · · · · · · · · ·
Owner(5) Or the larid upon which the subject well is a	er Notice Act (House Bill 2032), I have provided the following to the surface or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form
form; and 3) my operator name, address, phone num	the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this aber, fax, and email address.
vec will be tedrified to send this thiolwation to the :	rner(s). I acknowledge that, because I have not provided this information, the surface owner(s). To mitigate the additional cost of the KCC performing this 0 handling fee, payable to the KCC, which is enclosed with this form.
If choosing the second option, submit payment of the \$30.00 form and the associated Form C-1, Form CB-1, Form T-1, or	O handling fee with this form. If the fee is not received with this form, the KSONA-1 Form CP-1 will be returned.
hereby certify that the statements made herein are true and	correct to the best of my knowledge and belief.
Date: 6/15/2013 Signature of Operator or Agent:	M. Michael McNulty Title: Regional Land Manager
API # :15189221580000 KDOR	RECEIVED KANSAS CORPORATION COMMISSION

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202 JUN 1 8 2013

Surface Owners

API#:	15189221580000	Lease Name:	SALLEY	Well #: _2-3 INF
Own	er Name: FRANZ, MILES A	ALAN & ALEX GENI	≣	
	Address: 14471 CHADWIC	CK ST		
	City: LEAWOOD	State:	KS Zip : 66224-3930	
	ıer Name:			
	Address:			
	City:	State:	Zip:	
	er 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