#### 070113\_Sherwood.pdf

### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form must be Typed Form must be Signed All blanks must be Filed

# 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: 7/1/2013 Gas Lease: No. of Gas Walls 221941 KS Dept of Revenue Lease No.: Gas Gathering System:\_ Lease Name: SHERWOOD Saltwater Disposal Well - Permit No.: \_\_ \_ SE /Sec. 33 Twp. 33 R. 37W EXW \_feetfrom N/ SLine Legal Description of Lease: \_ feet from  $\square$  E /  $\square$  W Line Enhanced Recovery Project Permit No.: \_ T033S - R037W: SEC 033 All Entire Project: Yes No Number of Injection Wells County: Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE CHASE Production Zone(s): \*\* 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 Workover (7) Haul-Off Past Operator's License No. 5208 Contact Person: LAURIE KILBRIDE RECEIVED KANSAS CORPORATION COMMISSION Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: 713-431-1182 P. O. BOX 4358, HOUSTON, TX 77210-4358 JUN 1 8 2013 Date: 05/31/2013 Title. RSO MANAGER/AGENT & ATTORNEY-IN-FACT **CONSERVATION DIVISION** Signature: \_\_\_\_ Andrew D. Pole WICHITA, KS New Operator's License No. 32864 **BRENDA WALLER** Contact Person: \_\_ New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 Phone: 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: ONEOK FIELD SERVICES OKLAHOMA CITY, OK 73102 05/31/2013 Title: SR. OPERATIONS VICE PRESIDENT Signature: <u>Douglas C. Schultre</u> 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 Permit No.: \_\_\_ \_\_ . Recommended action: permitted by No.: \_\_\_ Authorized Signature Authorized Signature DISTRICT . Mail to: Past Operator\_ **New Operator** 

#### Side Two

#### Must Be Filed For All Wells

		1		
KDOR Lease No -	221941	V		

* Lease Name:	SHERWOOD		Location: 3:	3 33 37WSE	
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet f	Section Line rom South Line)	Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
2-3 INF	15189221880000	1363FSL	1644FEL	GAS	ACTIVE
		FSL/FNL	FEL/FWL		
<del></del>		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		
		FSUFNL	FEL/FWL		
		FSUFNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
-		FSL/FNL	FEL/FWL		
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twinters are a second		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL	VAN	RECEIVED SAS CORPORATION COMMISSION
		FSL/FNL	FEL/FWL _		
		FSL/FNL	FEL/FWL .		CONSERVATION DIVISION
		FSL/FNL	FEL/FWL .		WICHITA, KS

#### A separate sheet may be attached if necessary

<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

## CERTIFICATION OF COMPLIANCE WITH THE KANSAS SURFACE OWNER NOTIFICATION ACT

Form KSONA-1 July 2010 Form Must Be Typed Form must be Signed All blanks must be Filled

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				
Address 1: P. O. BOX 4358				
Address 2:	Lease Name: SHERWOOD Well #: 2-3 INF			
City: HOUSTON State: TX Zip: 77210 + 43	58 If filing a Form T-1 for multiple wells on a lease, enter the legal description of			
Contact Person: ADAM SCOTT	the lease below:			
Phone: ( 713 431-   875U Fax: ( 713 431-1475	T033S - R037W: SEC 033 All			
Email Address; adam.e.scott@exxonmobil.com				
Surface Owner Information:				
Name: See Attached				
Address 1:	malana mada di malana mada mada mada mana mada mada mada m			
Address 2:	· · · · · · · · · · · · · · · · · · ·			
City: State: Zip:+				
the KCC with a plat showing the predicted locations of lease roa	(Cathodic Protection Borehole Intent), you must supply the surface owners and ads, tank batteries, pipelines, and electrical lines. The locations shown on the plat			
the KCC with a plat showing the predicted locations of lease roa	l (Cathodic Protection Borehole Intent), you must supply the surface owners and ads, tank batteries, pipelines, and electrical lines. The locations shown on the plat ntered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
the KCC with a plat showing the predicted locations of lease rot are preliminary non-binding estimates. The locations may be electrone of the following:  X I certify that, pursuant to the Kansas Surface Owner I owner(s) of the land upon which the subject well is or CP-1 that I am filling in connection with this form; 2) if the form; and 3) my operator name, address, phone number—	notice Act (House Bill 2032), I have provided the following to the surface will be located: 1) a copy of the Form C-1 or Form CB-1, the plat (s) required by this er, fax, and email address.			
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JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

### **Surface Owners**

AP#:_	15189221880000	Lease Name: SHERWOOD	Well #: _2-
Own	er Name: WILLOUGHB	Y, GENE & MARYANN & HENSON, J	JAY & GENA
	Address: 994 ROAD 12		
	City: HUGOTON	State: KS Zip:	67951-5276
	er Name: Address:		
•			
	City:	State: Zip:	
Owne	er Name:		
•	Address:		
	City:	State: Zip:	
Owne	or Name:		
	Address:		
	City:	State: Zip:	
	r Name: \ddress:		
	City:	State: Zip:	

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS