### 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, 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 ... 204041 KS Dept of Revenue Lease No.: \_ Gas Gathering System: Lease Name: USAWHITE Saltwater Disposal Well - Permit No.: \_\_\_ \_NW Sec. 8 Two. 26 R. 35W \_ feet from 🦳 N / 🗌 S Line Legal Description of Lease: \_\_ feet from 🔲 E / 🔲 W Line T026S - R035W: SEC 008 All Enhanced Recovery Project Permit No.:\_ Entire Project: Yes No Number of Injection Wells County: Kearny 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) leet from E / W Line of Section Type of Pit: Emergency ] Haul-Off Workover ( ) Drilling Past Operator's License No. \_5208 ~ **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: \_\_\_ RECEIVED Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT KANSAS CORPORATION COMMISSION Signature: <u>Andrew D. Cole</u> **BRENDA WALLER** New Operator's License No. . Contact Person: CONSERVATION DIVISION New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 WICHITA, KS Phone: 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: \_\_WGP-KHC LLC 05/31/2013 **OKLAHOMA CITY, OK 73102** Date: ... 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 . Recommended action: permitted by No.: \_ Date: Authorized Signature

**New Operator** 

PRODUCTION \_

DISTRICT \_

Mail to: Past Operator\_

#### Side Two

#### Must Be Filed For All Wells

* Lease Name:	U S A WHITE	- Location: 8 26 35WN W			
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned
C1	15093004710000 🗸	2970FSL	2970FEL	GAS	ACTIVE
		FSL/FNL	FEUFWL		_
			FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEL/FWL		_
		FSL/FNL	FEL/FWL	KANSAS	RECEIVED CORPORATION COMMISSION
		FSL/FNL	FEL/FWL		JUN 1 8 2013
		FSUFNL	FEL/FWL	C	ONSERVATION 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

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	Missil Lacopton			
Name: EXXONMOBIL OIL CORPORATION	Well Location:Sec. 8 Twp.26 S. R. 35 EastX West			
Address 1:P. O. BOX 4358	County: Kearny			
address 2:	Lease Name: U S A WHITE Well #: C1			
ony: HOUSTON State: TX Zip: 77210 ++ 4358				
Contact Person: ADAM SCOTT	If filing a Form 1-1 for moltiple wells on a lease, enter the legal description of the lease below:			
hone: { 713 431-1859 Fax: { 713 431-1475	T026S - R035W: SEC 008 All			
mail Address: adam.e.scott@exxonmobil.com				
Surface Owner Information:				
lame: See Attached	When filing a Form 1-1 involving multiple surface owners, attach an additional			
ddress 1:	<ul> <li>sheet listing all of the information to the left for each surface owner. Surface owner information can be found in the records of the register of deeds for the</li> </ul>			
ddress 2:	county, and in the real estate property tax records of the county treasurer.			
ity:+				
Gelect one of the following:				
I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the land upon which the subject well is or will be k CP-1 that I am filing in connection with this form; 2) if the form I form; and 3) my operator name, address, phone number, fax, a	eated: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this			
	cknowledge that, because I have not provided this information, the mer(s). To mitigate the additional cost of the KCC performing this fee, payable to the KCC, which is enclosed with this form.			
choosing the second option, submit payment of the \$30.00 handling orm and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 I will be returned.			
hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.			
ate: 6/15/2013 Signature of Operator or Agent: W. Wichau	t McNutty Regional Land Manager			
	RECEIVED			

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

### **Surface Owners**

API#:	15093004710000	Lease Name: _	U S A WHITE	Weil #: <u>C1</u>
Own	er Name: WHITE ENTERP	RISES INC		
	<b>Address:</b> 1878 ROAD 180			
	City: LAKIN	State:	KS <b>Zip:</b> 67860	
	ner Name:			
	Address:			
	City:	State:	Zip:	
Own	er Name:			
	Address:			
	City:	State:	Zip:	
	er Name:			
4	Address:			
	City:	State:	Zip:	
	er Name:			
1	Address:			
	City:	State:	Zip:	

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS