070113_White_Heirs_SE.pdf

Authorized Signature

District

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 Effective Date of Transfer: Gas Lease: No. of Gas Wells : KS Dept of Revenue Lease No.: Gas Gathering System:_ Lease Name: WHITE HEIRS Saltwater Disposal Well - Permit No.: 16 _{Twn} 26 __feetfrom N/ SLine Legal Description of Lease: __ feet from \square E / \square W Line T026S - R035W: SEC 016 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.: lest 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 () 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 **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** Signature: Andrew D. Cole RECEIVED New Operator's License No. -**BRENDA WALLER** KANSAS CORPORATION COMMISSION Contact Person: New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 Phone: . 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: WGP-KHC LLC CONSERVATION DIVISION 05/31/2013 OKLAHOMA CITY, OK 73102 WICHITA, KS Title: SR. OPERATIONS VICE PRESIDENT Signature: Douglas C. Schultze 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 _____ . Recommended action: permitted by No.: _

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

New Operator

PRODUCTION _

Authorized Signature

Date:

DISTRICT -

Mail to: Past Operator_

Side Two

Must Be Filed For All Wells

* Lease Name:	WHITE HEIRS Location: 16 26 35WSE						
Well No.	API No. (YR DRLD/PRE '67)	Foolage Irom (i.e. FSL = Feet f	Footage Irom Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)		
A1	15093004790000 /	2323 FSL 2640FSL	2210 FEL 2840FEL	GAS	ACTIVE		
		FSL/FNL	FEUFWL				
		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				
			FEUFWL				
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			FEL/FWL				
kiliking til 2 kaning bilan bilan bilan mengal mer sar man, nganyan ngg	ALLEGORISMOSTICI MOSTILLOMAN	PSL/FNL	**************************************	Milderfres de la mildesta estata estata estata estata estata estata esta en esta en esta en esta en esta en es	edition to make and related harden in the condition in the condition in the condition of th		
	-	FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL	KAN	RECEIVED		
		FSL/FNL	FEL/FWL	, M	ISAS CORPORATION COMMISSION		
**************************************		FSL/FNL	FEL/FWL	The state of the s	JUN 1 8 2013		
<u>.</u>		FSL/FNL	FEL/FWL		CONSERVATION DIVISION 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.

OPERATOR: License # 5208		Well Location:
Name: EXXONMOBIL OIL C		
Address 1: P. O. BOX 4358	1999	
Address 2:		Lease Name: WHITE HEIRS Well #; A1
City: HOUSTON	State: <u>TX</u> Zip: <u>77210 +</u> + _	4358 If filling a Form 1-1 for multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT		the fease below:
Phone: (713 431-1664	Fax: (713 431-1475	T026S - R035W: SEC 016 All
Email Address: <u>adam.e.scott</u>	@exxonmobil.com	
Surface Owner Information:		
Name: See Attached	Antonio Mila materiale del Companyo del Companyo del Companyo del Companyo del Companyo del Companyo del Compa	When filing a Form 1.1 involving multiple surface owners, attach an additional
Address 1:		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
Address 2:	THE THE PART OF TH	county, and in the real estate property tax records of the county treasurer.
City:S	State:+ _ Zip:+ _	
Select one of the following:	ximates. The locations may be	entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
owner(s) of the land u CP-1 that I am filing in	ipon which the subject well is:	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 f the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this aber, fax, and email address.
• • •		
I have not provided thi KCC will be required t	to send this information to the	mer(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.
I have not provided thi KCC will be required t task, I acknowledge th	to send this information to the nat I am being charged a \$30.0	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. O handling fee with this form. If the fee is not received with this form, the KSONA-1
I have not provided thi KCC will be required to task, I acknowledge th If choosing the second option, form and the associated Form	to send this information to the lat I am being charged a \$30.0 submit payment of the \$30.0 or C-1, Form T-1, or	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. O handling fee with this form. If the fee is not received with this form, the KSONA-1
I have not provided thi KCC will be required to task, I acknowledge th If choosing the second option, form and the associated Form hereby certify that the statem	to send this information to the last I am being charged a \$30.0 submit payment of the \$30.0 oc. 1, Form T-1, or nexts made herein are true and	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. O handling fee with this form. If the fee is not received with this form, the KSONA-1 Form CP-1 will be returned.

JUN 1 8 2013

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

CONSERVATION DIVISION WICHITA, KS

Surface Owners

API#:	15093004790000	Lease Name: _	WHITE HEIRS	Well #: <u>A1</u>
Own	ner Name: WHITE DEVERS	IFIED LP		
	Address: 1580 HWY 50			
	City: LAKIN	State:	KS Zip: 67860	
	ner 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