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 Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: Gas Gathering System:. Lease Name: HERBERT BOLAND Saltwater Disposal Well - Permit No.: ___ 30 Twp. _ SE Sec. 26 R. 33W _____feet from N/ S Line Legal Description of Lease: _____feet from E / W Line T026S - R033W: SEC 030 All Linhanced Recovery Project Permit No.: _ Entire Project: Yes No Number of Injection Wells County: Finney Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE CHASE Production Zone(s): ** Side Two Must Be Completed. Injection Zone(s):_ Surface Pit Permit No.: _ leet from N / S Line of Section (API No. If Drill Pit, WO or Haul) leet from E / W Line of Section T Burn Type of Pit: Emergency 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 Date: ___ Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT Signature: <u>Andrew D. Pole</u> New Operator's License No. __32864 **BRENDA WALLER** Contact Person: RECEIVED New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 KANSAS CORPORATION COMMISSION 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: WGP-KHC LLC **OKLAHOMA CITY, OK 73102** 05/31/2013 CONSERVATION DIVISION Title: SR. OPERATIONS VICE PRESIDENT Signature: Douglas C. Schultze WICHITA, KS 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 Authorized Signature DISTRICT.

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

District

New Operator

Mail to: Past Operator_

Side Two

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Must Be Filed For All Wells

	HERBERT BOLAND	**************************************	* Location: 3	0 26 33WLS E	
Well No.	API No. (YR DRLD/PRE '67)	Foolage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
1	15055007080000 🗸	2273FSL	2301FEL	GAS	ACTIVE
		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	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 _

FSUFNL _

FSL/FNL

FSL/FNL

FSL/FNL

.FSL/FNL __

FSL/FNL _

____ FEL/FWL

FEL/FWL

_FEL/FWL

FELFWL

. FEL/FWL

FELFWL

RECEIVED

JUN 1 8 2013

CONSERVATION DIVISION

WICHITA, KS

KANSAS CORPORATION COMMISSION

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 Name: EXXONMOBIL OIL CORPORATION		Well Location:		
Address 1:P. O. BOX 4358		ounty: Finney		
Address 2:		ase Name: HERBERT BOLAND Well #: 1		
Cay: HOUSTON State: TX Zip: 77210 + 4358				
Contact Person: ADAM SCOTT		If filing a Form 1-1 for multiple wells on a lease, enter the legal description of the lease below:		
Phone: (713 431-1859 Fax	TC 713 431-1475	T026S - R033W: SEC 030 All		
Email Address: adam.e.scott@exxonm				
Surface Owner Information:				
Name: See Attached	w	en 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:		inty, and in the real estate property tax records of the county treasurer.		
City: State:	Zip:+			
Select one of the following:		orm C-1 plat, Form CB-1 plat, or a separate plat may be submitted.		
owner(s) of the land upon whic CP-1 that I am filing in connecti	h the subject well is or will be located:	use Bill 2032), I have provided the following to the surface 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form led is a Form C-1 or Form CB-1, the plat(s) required by this all address.		
I have not provided this informa	tion to the surface owner(s). I acknowless information to the surface owner(s)	edge that, because I have not provided this information, the . To mitigate the additional cost of the KCC performing this		
KCC will be required to send the		ayable to the KCC, which is enclosed with this form.		
KCC will be required to send the task, I acknowledge that I am be If choosing the second option, submit p	eing charged a \$30.00 handling fee, pa payment of the \$30.00 handling fee with	hyable to the KCC, which is enclosed with this form. The this form. If the fee is not received with this form, the KSONA-1		
KCC will be required to send the task, I acknowledge that I am be	eing charged a \$30.00 handling fee, pa payment of the \$30.00 handling fee wit m CB-1. Form T-1. or Form CP-1 will b	hyable to the KCC, which is enclosed with this form. In this form, If the fee is not received with this form, the KSONA-1 e returned.		
KCC will be required to send the task, I acknowledge that I am be if choosing the second option, submit p form and the associated Form C-1. For I hereby certify that the statements made	eing charged a \$30.00 handling fee, pa payment of the \$30.00 handling fee wit m CB-1. Form T-1. or Form CP-1 will b	hyable to the KCC, which is enclosed with this form. The KSONA-1 ereturned.		

JUN 1 8 2013

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

CONSERVATION DIVISION WICHITA, KS

Surface Owners

API#:	15055007080000	Lease Name: _	HERBERT BOLAND	Well #: _1
	ner Name: STONE, STEVEI Address: 10925 S SANDHI	ILL RD		
	City: GARDEN CITY	State:	KS Zip: 67846-8917	
	er Name: Address:			
	City:	State:	Zip:	
	er Name: Address:			
	City:	State:	Zip:	
	r Name: .ddress:			
	City:	State:	Zip:	
	r Name: ddress:			
	City:	State:	Zip:	

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