## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1 March 2010 Form must be Typed Form must be Signed Ail 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,
MIST be submitted with this form

Check Applicable Boxes: MUST be a	submitted with this form.
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 7/1/2013
Gas Lease: No. of Gas Wells **	KS Dept of Revenue Lease No.: 202570
Gas Gathering System:	
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T026S - R034W: SEC 013 All
Entire Project: Yes No	
Number of Injection Wells **	County: Finney
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s):
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:	
(API No. if Drill Pit, WO or Haul)	feet fromN /S Line of Section
Time of Dis.	feet from E / W Line of Section
Type of Pit: Emergency Burn Settling	Haul-Off Workover OR Drilling
Past Operator's License No. 5208	Contact Person: LAURIE KILBRIDE RECEIVED
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	CONSERVATION DIVISION Signature: Andrew D. Cole WICHITA, KS
New Operator's License No. 32864	Contact Person: BRENDA WALLER
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259
210 PARK AVENUE, SUITE 2350	
	Oil / Gas Purchaser: ONEOK FIELD SERVICES
OKLAHOMA CITY, OK 73102	Date: 05/31/2013
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultze</u>
Acknowledgment of Transfer: The above request for transfer of injection	ction authorization, surface pit permit # has been
noted, approved and duly recorded in the records of the Kansas Corpora	ation Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in	n 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	
Permit No.: Recommended action:	
. Hocominatad actor.	permitted by No.:
Date:	Date:
Authorized Signature /	Authorized Signature
DISTRICT EPR 10/14/13	PRODUCTION 10.15.13 UIC 10-15-13
l	perator District

#### Side Two

#### Must Be Filed For All Wells

		<b>V</b>	
KDOR Lease No.: _	202570		

* Lease Name:	AD MILLS UNIT	* Location: 13 26 34WSE				
Well No.	API No. (YR DRLD/PRE '67) 15055218201/	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/Ta'D/Abandoned)	
		2310FSL	2310FEL	СВ	DR	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL	**************************************	-	
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		FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL		_	
		FSL/FNL	FEL/FWL	<del></del>	_	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL				
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	•	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
***		FSL/FNL	FEL/FWL			
	-	FSL/FNL	FEL/FWL		RECEIVED	
		FSL/FNL	FEL/FWL		CORPORATION COMMISSION	
		FSL/FNL	FEL/FWL		JUN 2 1 2013	
		FSL/FNL	FEL/FWL	cc	ONSERVATION DIVISION 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	Well Location:			
Name: EXXONMOBIL OIL CORPORATION				
Address 1: P. O. BOX 4358				
Address 2:	•			
City: HOUSTON State: TX Zip: 77210 + 4358  Contact Person: ADAM SCOTT				
Phone: ( 713 431-1475 Fax: ( 713 431-1475	T026S - R034W: SEC 013 All			
Email Address: adam.e.scott@exxonmobil.com				
Ellida Addless.				
Surface Owner Information:				
Name: See Attached				
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:				
City:				
the KCC with a plat showing the predicted locations of lease roads, tail	nodic Protection Borehole Intent), you must supply the surface owners and nk batteries, pipelines, and electrical lines. The locations shown on the plat 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 roads, tai are preliminary non-binding estimates. The locations may be entered Select one of the following:	nk batteries, pipelines, and electrical lines. The locations shown on the plat 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 roads, tai are preliminary non-binding estimates. The locations may be entered a Select one of the following:  I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be	nk batteries, pipelines, and electrical lines. The locations shown on the plat on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.  Act (House Bill 2032), I have provided the following to the surface located: 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			
the KCC with a plat showing the predicted locations of lease roads, tai are preliminary non-binding estimates. The locations may be entered a Select one of the following:  X I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax,	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1 or Form CB-1, the plat(s) required by this and email address.  acknowledge that, because I have not provided this information, the powner(s). To mitigate the additional cost of the KCC performing this			
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

CONSERVATION DIVISION WICHITA, KS

### **Surface Owners**

API#: 1505521820	Lease Name:	AD MILLS UN	NT .	Well #:1
Owner Name: Whea	tland Electric Cooperative Inc	<b>)</b> .		
Address: PO Bo Garde				
City:	State:	KS <b>Zip</b> :	67846	
Owner Name:				
Address:				
City:	State:	Zip:		
Owner Name:				
Address:				
City:	State:	Zip:		
Owner Name: Address:				
City:	State:	Zip:		
Owner Name: Address:				
City:	State:	Zip:		

RECEIVED KANSAS CORPORATION COMMISSION

JUN 2 1 2013

CONSERVATION DIVISION WICHITA, KS