Authorized Signature

District

10-23-13

### 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: 7/1/2013 Effective Date of Transfer: Oil Lease: No. of Oil Wells \_ 1 219914 Gas Lease: No. of Gas Wells . KS Dept of Revenue Lease No.: \_ Gas Gathering System: Lease Name: A W HUNT Saltwater Disposal Well - Permit No.: ..... 31 Twp. 27 R. \_ . NE Sec. \_ TE XW \_\_\_feet from 🔲 N / 🔲 S Line Legal Description of Lease: \_\_ feet from 🔲 E / 🔲 W Line T027S - R036W: SEC 031 All Enhanced Recovery Project Permit No.: \_ Entire Project: Yes No County: Grant Number of Injection Wells Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE CHASE Production Zone(s):\_\_\_ \*\* Side Two Must Be Completed. Injection Zone(s): feet from N / S Line of Section Surface Pit Permit No.: \_ (API No. If Drill Pit, WO or Haul) feet from E / W Line of Section Workover (\range ) Drilling Burn Settling Haul-Off Type of Pit: Emergency **LAURIE KILBRIDE** Contact Person: Past Operator's License No. Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: 713-431-1182 P. O. BOX 4358, HOUSTON, TX 77210-4358 05/31/2013 Date: .... RSO MANAGER/AGENT & ATTORNEY-IN-FACT Signature: Andrew D. Cole **BRENDA WALLER** New Operator's License No. 32864 Contact Person: . RECEIVED KANSAS CORPORATION COMMISSION New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 Phone: Oil / Gas Purchaser: WGP-KHC LLC 210 PARK AVENUE, SUITE 2350 <del>JUN 1-8-2013</del> 05/31/2013 OKLAHOMA CITY, OK 73102 CONSERVATION DIVISION WICHITA, KS Signature: <u>Douglas C. Schultre</u> Title: SR. OPERATIONS VICE PRESIDENT 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 of the above named lease containing the surface pit the new operator and may continue to inject fluids as authorized by permitted by No.: \_\_\_\_ \_\_\_ . Recommended action: \_ Permit No.: \_\_ Date:

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

**New Operator** 

**PRODUCTION** 

OCT

Authorized Signature

DISTRICT .

Mail to: Past Operator\_

#### Side Two

#### Must Be Filed For All Wells

| * Lease Name: A W HUNT             |                |   | Location: 3' | Location: 31 27 36W NE   |                                      |  |
|------------------------------------|----------------|---|--------------|--|--------------------------------------|--|
| Well No. API No. (YR DRLD/PRE '67) |                | Footage from Section Line (i.e. FSL = Feet from South Line) |              | Type of Well<br>(OlVGas/INJ/WSW)   | Well Status<br>(PROD/TA'D/Abandoned) |  |
| 3 INF                              | 15067213040000 | 4030FSL   | 1260FEL      | GAS  | ACTIVE                               |  |
|                                    |                | 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      |  |                                      |  |
|                                    |                | FSL/FNL   | FEL/FWL      |  |                                      |  |
|                                    |                | FSL/FNL   | FEL/FWL      |  |                                      |  |
|                                    |                | FSL/FNL   | FEL/FWL      |  |                                      |  |
|                                    |                | FSL/FNL   | FEL/FWL      |  |                                      |  |
|                                    |                | FSL/FNL   | FEL/FWL      |  |                                      |  |
|                                    |                | FSUFNL  | FEL/FWL      |  |                                      |  |
|                                    |                | FSL/FNL   | FEL/FWL      | To all the second control of the second cont |                                      |  |
|                                    |                | FSL/FNL   | FEL/FWL      |  |                                      |  |
|                                    |                | FSL/FNL   | FEL/FWL      |  |                                      |  |
|                                    |                | FSL/FNL   | FEL/FWL      |  |                                      |  |
|                                    |                | FSL/FNL   | FEL/FWL      |  | RECEIVED                             |  |
|                                    |                | FSL/FNL   | FEL/FWL      |  | KANSAS CORPORATION COMMISSIO         |  |
|                                    |                | FSL/FNL   | FEL/FWL      |  | JUN_1 8 2013                         |  |
|                                    |                | FSL/FNL   | FEL/FWL      |  | CONSERVATION DIVISION WICHITA, KS    |  |

A separate sheet may be attached if necessary

<sup>&</sup>quot;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   | Datis (Antillación de la colombia de Maria de Maria (Antillación de Maria)   | _VE Sec.31 Twp.27 S. R.36 Eas(X)West   |  |  |
| Address 1: P. O. BOX 4358  | County: Grant  |  |  |  |
| Address 2:   | Lease Name: A  | Well #: 3 INF  |  |  |
| City: HOUSTON State: TX Zip: 7721  |  | If filing a Form T-1 for multiple wells on a lease, enter the legal description of   |  |  |
| Contact Person: ADAM SCOTT   | the lease below<br>T027S - R036V   | T027S - R036W: SEC 031 All   |  |  |
| Phone: ( 713 431- 1859 Fax: ( 713 431-14   | 175  |  |  |  |
| Email Address: adam.e.scott@exxonmobil.com   | <del> </del>   |  |  |  |
| Surface Owner Information:   |  |  |  |  |
| Name: See Attached   | When filing a Fo   | When filing a Form T-1 involving multiple surface owners, attach an additional<br>sheet listing all of the information to the left for each surface owner. Surface<br>owner information can be found in the records of the register of deeds for the |  |  |
| Address 1:   | owner informati  |  |  |  |
| Address 2:   | county, and in the   | he real estate property tax records of the county treasurer.   |  |  |
| City: State: Zip:  | +  |  |  |  |
| Select one of the following:  I certify that, pursuant to the Kansas Surface owner(s) of the land upon which the subject w                             | ell is or will be located: 1) a copy :                                       | of the Form C-1, Form CB-1, Form T-1, or Form  |  |  |
| CP-1 that I am filing in connection with this for form; and 3) my operator name, address, phon   | n; 2) if the form being filed is a For<br>le number, fax, and email address. | m C-1 or Form CB-1, the plat(s) required by this   |  |  |
| I have not provided this information to the surfa<br>KCC will be required to send this information to<br>task, I acknowledge that I am being charged a | o the surface owner(s). To mitigat   | because I have not provided this information, the te the additional cost of the KCC performing this le KCC, which is enclosed with this form.  |  |  |
| If choosing the second option, submit payment of the form and the associated Form C-1, Form CB-1. Form   | \$30.00 handling fee with this form<br>F-1, or Form CP-1 will be returned.   | . If the fee is not received with this form, the KSONA-1   |  |  |
| I hereby certify that the statements made herein are tru   | ue and correct to the best of my kn  | owledge and belief.  |  |  |
| Date: 6/15/2013 Signature of Operator or Ager  | nt:M. Michael McNulty  | Title: Regional Land Manager   |  |  |
| API # :15067213040000  | KDOR #219914   | RECEIVED   |  |  |

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

JUN 1 8 2013

KANSAS CORPORATION COMMISSION

### **Surface Owners**

City:

API#: 15067213040000 Lease Name: \_\_A W HUNT Well #: 3 INF Owner Name: KOEHN, VERNON J & FRANCES L TRUST Address: 3559 E RD 6 City: ULYSSES State: KS Zip: 67880 Owner Name: Address: City: State: Zip: **Owner Name:** Address: City: State: Zip: **Owner Name:** Address: City: State: Zip: Owner Name: Address:

State:

Zip:

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS