070113\_Bolton.pdf

## 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: BOLTON Saltwater Disposal Well - Permit No.: \_\_\_ 8 Twp. 35 R. 37W FXW Spot Location: \_\_\_\_\_\_ feet from N / S Line Legal Description of Lease: \_\_ feet from 🔲 E / 🔲 W Line T035S - R037W: SEC 008 NE4, NW4, SW4, SE4 Enhanced Recovery Project Permit No.:\_ Entire Project: Yes No Number of Injection Wells. County: Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zone(s): COUNCIL GROVE \*\* 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 Bum Settling Haul-Off Workover Drilling Past Operator's License No. 5208. Contact Person: \_\_LAURIE KILBRIDE Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: 713-431-1182 RECEIVED P. O. BOX 4358, HOUSTON, TX 77210-4358 KANSAS CORPORATION COMMISSION Date: 05/31/2013 **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** Signature: \_\_Andrew D. Cole CONSERVATION DIVISION WICHITA, KS **BRENDA WALLER** New Operator's License No. -Contact Person: . New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 Phone: . 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchasar ONEOK FIELD SERVICES OKLAHOMA CITY, OK 73102 05/31/2013 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 Becommended actions permitted by No.: \_\_\_ Authorized Signature Authorized Signature DISTRICT. PRODUCTION \_\_\_

New Operator

Mail to: Past Operator\_

#### Side Ton

#### Must Be Filed For All Wells

7

Lease Name: _	BOLTON	* Location: 8 35 37WN VJ				
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fi	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned	
12	15189205400000	3960FSL	3960FEL	GAS	ACTIVE	
					_	
		FSL/FNL	FEL/FWL		·	
		FSL/FNL	FEUFWL			
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		FSL/FNL	FEL/FWL			
		FSL/FNL		KAN	RECEIVED SAS CORPORATION COMMISSIO	
		FSL/FNL	FEL/FWL		JUN 1 8 2013	
-		ESI /ENI	FEUTWL.	AND THE CONTRACT OF THE CONTRA	CONSERVATION DIVISION	

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.

Select the corresponding form being	filed: C-1 (lixent) CB-1 (Cath	odic Protection Borehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)			
OPERATOR: License #5208		Well Location:			
Name: EXXONMOBIL OIL CORPORA	TION	NW Sec. 8 Twp.35 S. R. 37 Eas X West			
Address 1: P. O. BOX 4358	armore and the professional states for the extra considerate conjugates, \$1000 const.	County: Stevens			
Address 2:		Lease Name: BOLTON Well #: 1-2			
City: 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 Fa	x: ( 713 431-1475	T035S - R037W: SEC 008 NE4, NW4, SW4, SE4			
Email Address: adam.e.scott@exxonm					
Surface Owner Information:					
Name: See Attached	PM to consider on the content of the	When filing a Form T.1 involving multiple surface owners, attach an additional			
Address 1:		sheet listing all of the information to the left for each surface owner. Surface			
Address 2:		owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.			
City:State:					
are preliminary non-binding estimates.  Select one of the following:	The locations may be entered on the	teries, pipelines, and electrical lines. The locations shown on the plat Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
owner(s) of the land upon whice CP-1 that I am filing in connecti form; and 3) my operator name.	n the subject well is or will be locate on with this form; 2) if the form being address, phone number, fax, and e tion to the surface owner(s). I ackno	Wiedge that, because I have not provided this information, the			
task, I acknowledge that I am b	is information to the surface owner( eing charged a \$30.00 handling fee,	s). To mitigate the additional cost of the KCC performing this payable to the KCC, which is enclosed with this form.			
If choosing the second option, submit p form and the associated Form C-1, For	ayment of the \$30.00 handling fee on CB-1, Form T-1, or Form CP-1 with	vith this form. If the fee is not received with this form, the KSONA-1 be returned.			
hereby certify that the statements mad	e herein are true and correct to the	pest of my knowledge and belief.			
Date: 6/15/2013 Signature of 6	Operator or Agent:	Multy Title: Regional Land Manager			
API # :15189205400000	KDOR #208205	RECEIVED KANSAS CORPORATION COMMISSION			

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

### **Surface Owners**

API#:	15189205400000	Lease Name: _	BOLTON		Well #:1_2	
Owr	ner Name: KNIER, DONALD	JR & TONYA				
	Address: PO BOX 21					
	City: HUGOTON	State:	KS Zip:	67951-0021		
	ner Name:					
	Address:					
	City:	State:	Zip:	:		
	er Name:					
	Address:					
	City:	State:	Zip:			
	er Name: Address:					
•						
	City:	State:	Zip:			
	er Name: Address:					
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RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS