KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

070113_Combes_12-Pdf
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,

Check Applicable Boxes: MUST be sub-	nitted with this form.		
Oil Lease: No. of Oil Wells	Effective Date of Transfer: 7/1/2013 KS Dept of Revenue Lease No.: 208419 Lease Name: COMBES SW_Sec. 12 Twp. 32 R. 35W EXW		
teet from E / W Line Enhanced Recovery Project Permit No.: Entire Project: Yes No Number of Injection Wells Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE ** Side Two Must Be Completed.	Legal Description of Lease: T032S - R035W: SEC 012 NE4 NE4, W2 NE4, SE4 NE4, NE4 SE4, S2 SE4, NW4 SE4, SW4, NW4 County: Stevens Production Zone(s): COUNCIL GROVE Injection Zone(s):		
Surface Pit Permit No.: (API No. II Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	leet from N / S Line of Sectionleet from E / W Line of Sectionleet from Drilling		
Past Operator's License No. 5208 Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION P. O. BOX 4358, HOUSTON, TX 77210-4358 Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Contact Person: LAURIE KILBRIDE Phone: 713-431-1182 KANSAS CORPORATION COMMISSION Date: 05/31/2013 JUN 1 8 2013 Signature: Andrew D. Cole CONSERVATION DIVISION WICHTA, KS		
New Operator's License No. 32864 New Operator's Name & Address: XTO ENERGY INC. 210 PARK AVENUE, SUITE 2350 OKLAHOMA CITY, OK 73102 Title: SR. OPERATIONS VICE PRESIDENT	Contact Person: BRENDA WALLER Phone: 405-319-3259 Oil / Gas Purchaser: ONEOK FIELD SERVICES Date: 05/31/2013 Signature: Douglas C. Schultze		
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duty recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation		
is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action:	the new operator of the above named lease containing the surface pit permitted by No.:		
Date:	Date:		

Side Two

Must Be Filed For All Wells

* Lease Name:	COMBES		Location: 12	* Location: 12 32 35WSW		
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oll/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned	
B12	15189205390000 /	1980FSL	3960FEL	GAS	ACTIVE	
			FEL/FWL			
			FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
<u></u>		FSUFNL	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			
-		FSL/FNL	FEL/FWL .			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL	EPT 1 PHYCOGROSSICATION AND INVESTMENT AND A CONTRACTOR A		
		FSL/FNL	FEL/FWL			
•		FSL/FNL	FEL/FWL	KAN	RECEIVED SAS CORPORATION COMMISSION	
	,	FSL/FNL	FEL/FWL .		JUN 1 8 2013	
		FSL/FNL	FEL/FWL .		CONSERVATION DIVISION	

A separate sheet may be attached if necessary

_FEL/FWL

_FSL/FNL __

WICHITA, KS

^{*} 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 CORPORAT		SW Sec. 12 Twp.32 S. R. 35 East X West
Address 1: P. O. BOX 4358		
Address 2:	•	OMBES Well #: B1-2
City: HOUSTON State: TX	1070	1 for multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT	the lease below.	
Phone: (713 431- 1859 Fax		': SEC 012 NE4 NE4, W2 NE4, SE4 NE4, NE4 W4 SE4, SW4. NW4
Email Address: adam.e.scott@exxonmo		
Surface Owner Information:		
Name: See Attached	When filing a Fo	un T.1 involving multiple surface owners, attach an additional
Address 1:	sheet listing all c	if the information to the left for each surface owner. Surface
Address 2:	CHAIR HICKLING	n can be found in the records of the register of deeds for the ereal estate property tax records of the county treasurer.
City: State:		,
owner(s) of the land upon which	insas Surface Owner Notice Act (House Bill 203; the subject well is or will be located: 1) a copy o in with this form; 2) if the form being filed is a Forn	f the Form C-1. Form CB-1. Form T-1. or Form
form; and 3) my operator name,	address, phone number, fax, and email address.	re-rol rollines-1, the placts) required by this
KCC will be required to send thi	on to the surface owner(s). I acknowledge that, be s information to the surface owner(s). To mitigate ing charged a \$30.00 handling fee, payable to the	the additional cost of the KCC performing this
f choosing the second option, submit po form and the associated Form C-1, Form	nyment of the \$30.00 handling fee with this form. or CB-1, Form T-1, or Form CP-1 will be returned.	If the fee is not received with this form, the KSONA-1
hereby certify that the statements made	herein are true and correct to the best of my kno	wledge and belief.
Date: 6/15/2013 Signature of C	perator or Agent: M. Michael McNulty	Title: Regional Land Manager
API # :15189205390000	KDOR #208419	RECEIVED KANSAS CORPORATION COMMISSI

JUN 1 8 2013

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

CONSERVATION DIVISION WICHITA, KS

Surface Owners

API#:	15189205390000	Lease Name: _	COMBES		Well #: <u>B12</u>		
Owner Name: HOLT, ROBERT RAY							
	Address: 2698 ROAD V						
	City: MOSCOW	State:	KS Zip:	67952-5242			
Own	er Name:						
	Address:						
	City:	State:	Zip:				
	er Name: Address:						
	City:	State:	Zip:				
Owne	or Name:						
P	Address:						
	City:	State:	Zip:				
	r Name: Address:						
	City:	State:	Zip:				

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS