### 070113 Emma Elliott.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 Compilance with the Kansas Surface Owner Notification Act,
MUST be submitted with this form.

Check Applicable Boxes: #CS1 De submit	tted with this form.			
Oil Lease: No. of Oil Wells  X Gas Lease: No. of Gas Wells  Gas Gathering System:  Saltwater Disposal Well - Permit No.:  Spot Location: feet from N / S Line  feet from E / W Line  Enhanced Recovery Project Permit No.:  Entire Project: Yes No	Effective Date of Transfer: 7/1/2013  KS Dept of Revenue Lease No.: 208248  Lease Name: EMMA ELLIOTT			
Number of Injection Wells	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	S Line of Section   N / S Line of Section   E / W Line of Section   Haul-Off   Workover OF   Drilling			
Past Operator's License No	Contact Person: LAURIE KILBRIDE  Phone: 713-431-1182  CANSAS CORPORATION COMMISSION  Date: 05/31/2013  Signature: Andrew D. Cole  CONSERVATION DIVISION WICHITA, 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  Acknowledgment of Transfer: The above request for transfer of injection at noted, approved and duly recorded in the records of the Kansas Corporation C				
Commission records only and does not convey any ownership interest in the al is acknowledged as the new operator and may continue to inject fluids as authorized by				
Permit No.: Recommended action:  Date:	Date:			

#### Side Two

Must Be Filed For All Wells

* Lease Name: EMMA ELLIOTT			Location: 8	*Location: 8 32 38W/VE			
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet t	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status CD/(A D/Abandoned)		
1	15189203020000 V	3960FSL	1320FEL	GAS	ACTIVE		
The second second second		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL				
	<del></del>	FSL/FNL	FEL/FWL	MT			
		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		-		
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		-		
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		FSL/FNL	FEUFWL				
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		FSL/FNL	FEL/FWL		RECEIVED		
		FSL/FNL	FEL/FWL		KANSAS CORPORATION COMMI		
		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> 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 Plygging Application).

Any such form submitted without an accompanying Form KSONA-1 will be returned.

OPERATOR: License # 5208		ARRAN Consistence			
	ORATION	Well Location: N€ ⊙	ec.8 Twp.32 S. R.38 Eas X West		
Address 1: P. O. BOX 4358			ec		
Address 2:			LLIOTT Well #: 1		
City: HOUSTON State					
Contact Person: ADAM SCOTT		the lease below:	for multiple wells on a lease, enter the legal description		
Phone: ( 713 /431- 1859	Fax: ( 713 431-1475		008 NE4 SEC 009 NW4 T034S -		
Email Address: adam.e.scott@ex		R038W: SEC 007 SE4	NE4		
Surface Owner Information:					
Name: See Attached	PROPERTY AND		involving multiple surface owners, attach an additional		
Address 1:		sheet listing all of the in	formation to the left for each surface owner. Surface be found in the records of the register of deeds for the		
Address 2:		county, and in the real e	state property tax records of the county treasurer.		
City:State	Zip:+				
Select one of the following:	•	<b>,</b> ,	CB-1 plat, or a separate plat may be submitted.		
owner(s) of the land upon CP-1 that I am filing in cor form: and 3) my operator r	which the subject well is or will nection with this form; 2) if the ( lame, address, phone number, (	be located: 1) a copy of the F form being filed is a Form C-1 of ax, and email address.	eve provided the following to the surface form C-1, Form CB-1, Form T-1, or Form or Form CB-1, the plat(s) required by this ell have not provided this information, the		
KCC will be required to se	nd this information to the surfa	ce owner(s). To mitigate the a	dditional cost of the KCC performing this which is enclosed with this form.		
f choosing the second option, sui form and the associated Form C-1			fee is not received with this form, the KSONA-1		
hereby certify that the statements	made herein are true and corre	ect to the best of my knowledg	e and belief.		
Date: 6/15/2013 Signatu	re of Operator or Agent:	Hichael McNulty	Title: Regional Land Manager		
API # :15189203020000	KDOR #208	1248	RECEIVED KANSAS CORPORATION COMMISSIO		

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

### **Surface Owners**

API#: 1518920		3020000	Lease Name: _	EMMA ELLIOTT	
Own	er Name:	HAVLIN, VADA L			
		1757 AVENIDA SE	EVILLA		
	City:	OCEANSIDE	State:	CA Zip:	92056-6208
Own	er Name:				
	Address:				
	City:		State:	Zip:	
Own	er Name:				
	Address:				
	City:		State:	Zip:	
	or Name: Address:				
	City:		State:	Zip:	
	er Name: Address:				
	City:		State:	Zip:	

"AMILE"

Well #: \_\_1\_\_\_

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS