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### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 1-1 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,
MIST he submitted with this form

Check Applicable Boxes: MUST be subm	nitted with this form.
Check Applicable Boxes:  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  [entire Project: Yes No Number of Injection Wells**  Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Effective Date of Transfer: 7/1/2013  KS Dept of Revenue Lease No.: 220121  Lease Name: ERDWIEN
** Side Two Must Be Completed.	Injection Zone(s):
Surface Pit Permit No.:  (API No. If Drill Pit, WO or Haul)  Type of Pit: Emergency Burn Settling	ieet from N / S Line of Section teet from E / W Line of Section Built-Off Workover Drilling
Past Operator's License No. 5208	Contact Person: LAURIE KILBRIDE
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION P. O. BOX 4358, HOUSTON, TX 77210-4358  Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Phone: 713-431-1182  Phone: 05/31/2013  Contact Person: RECEIVED  KANSAS CORPORATION COMMISSION  Signature: Andrew D. Cole  JUN 1 8 2013
New Operator's License No. 32864  New Operator's Name & Address: XTO ENERGY INC.  210 PARK AVENUE, SUITE 2350  OKLAHOMA CITY, OK 73102	Contact Person: BRENDA WALLER WICHITA, KS  Phone: 405-319-3259  Oil / Gas Purchaser: ONEOK FIELD SERVICES  Date: 05/31/2013
Title: SR. OPERATIONS VICE PRESIDENT	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	n Commission. This acknowledgment of transfer pertains to Kansas Corporation
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:
DISTRICT EPR ///3 Mail to: Past Operator New Opera	PRODUCTION <u>10.22.13</u> uic <u>10-32-13</u> ntor

#### Side Two

#### Must Be Filed For All Wells

Lease Name	ERDWIEN Location: 23 34 36₩ N i					
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet f	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)	
2 INF	15189218880001	1250FNL	1250FWL	GAS	ACTIVE	
	-				····	
		FSL/FNL	FEL/FWL	M. Herrisonan announce and a second and a second		
		FSL/FNL	FEUFWL			
······································	•	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		_	
		FSL/FNL	FEL/FWL		_	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		<u> </u>	
		FSL/FNL	FEL/FWL		_	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		_	
		FSL/FNL	FEL/FWL			
			FEL/FWL		<del>.</del>	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL				
MA. W		FSL/FNL	FEL/FWL	***************************************		
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		RECEIVED	
		FSL/FNL	FEL/FWL	К	ANSAS CORPORATION COMMISSIO	
		FSL/FNL	FEL/FWL		JUN 1 8 2013	

\_ FEL/FWL

\_FSL/FNL \_

**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 Permil); 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	navonas v v todanostičký vilkostiková to 1914 om – skrovátnostičký krádnost ná v nákopinostanka stá	NW Sec. 23 Tw	p.34 S. R.36 Eas X West		
Address 1: P. O. BOX 4358		County: Stevens			
Address 2:		Lease Name: ERDWIEN	Well #: 2 INF		
City: HOUSTON State: TX 2 Contact Person: ADAM SCOTT		If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below: T0348 - R036W: SEC 023 SE4, NE4, NW4, N2 SW4, S2 SW4			
Phone: ( 713 431- 1859 Fax: ( _	713 431-1475				
Email Address: adam.e.scott@exxonmobil.d					
Surface Owner Information:					
Name: See Attached			tiple surface owners, attach an additional		
Address 1:		owner manner can be loand in the records of the register of decad for the			
Address 2:					
City: State: 7	Zip:+				
Select one of the following:	ŕ		. , .		
I certify that, pursuant to the Kansa owner(s) of the land upon which the CP-1 that I am filing in connection w form; and 3) my operator name, add	e subject well is or will be locate vith this form; 2) if the form being	ed: 1) a copy of the Form C-1, F g filed is a Form C-1 or Form CB	orm CB-1, Form T-1, or Form		
I have not provided this information KCC will be required to send this in task, I acknowledge that I am being	formation to the surface owner	(s). To mitigate the additional co	st of the KCC performing this		
If choosing the second option, submit paym form and the associated Form C-1, Form C			eceived with this form, the KSONA-1		
I hereby certify that the statements made he	erein are true and correct to the	best of my knowledge and belief	ı.		
		A 484 A .			
Date: 6/15/2013 Signature of Oper	rator or Agent:	Enalty Tille: _	Regional Land Manager		

RECEIVED KANSAS CORPORATION COMMISSION

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

JUN 1 8 2013

### **Surface Owners**

API#:	1518921	8880001	Lease Name: _	ERDW	EN		Well #: 2 INF	_
Own	er Name:	STANFIELD, ELV	VA & WARRAN TR					
	Address:	PO BOX 322						
	City:	HAVILAND	State:	KS	Zip:	67059-0322		
	ner Name: Address:							
	City:		State:		Zip:		•	
	er Name: Address:							
	City:		State:		Zip:			
	er Name: Address:							
	City:		State:		Zip:			
	er Name: Address:							
	City:		State:		Zip:			

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS