KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

070113_GM_Hampton_3.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 a	submitted with this form.
Oil Lease: No. of Oil Wells 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:
Surface Pit Permit No.: (API No. If Drill Pit, WO or Haul) Type of Pit: Emergency Burn Settling	leet from N / S Line of Section leet from E / W Line of Section Haul-Off Workover
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 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 to the process of the Kansas Corporation Commission records only and does not convey any ownership interest in the commission records only and does not convey any ownership interest in the commission records only and does not convey any ownership interest in the commission records only and does not convey any ownership interest in the commission records only and does not convey any ownership interest in the convey any ownership interest in the convey and convey a	Contact Person:
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
Date:	PRODUCTION 10.17.13 UIC 10-17-13
TOW Open	raior District

Side Two

Must Be Filed For All Wells

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KDOR Lease No -	201587		
NUUT LARRA NA			

* Lease Name:	G M HAMPTON	*Location: 3 28 36W: 5 E				
Well No.	API No. (YR DRLD/PRE '67)	Foolage from	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned)	
1 1	15067001420000 🗸	2310FSL	2310FEL	GAS	ACTIVE	
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		FSL/FNL	FEL/FWL			
-		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEUFWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	———FEL/FWL			
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL _		RECEIVED KANSAS CORPORATION COMMISSION	
		FSL/FNL .	FEL/FWL _		— JUN 1-8-2013 —	
		FSL/FNL .	FEL/FWL _		CONSERVATION DIVISION	
		FSL/FNL _	FEL/FWL _		WICHITA, KS	

A separate sheet may be attached if necessary

^{*} 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.

API # :15067001420000 KDOR #201582	RECEIVED KANSAS CORPORATION COMMISSION			
ate: 6/15/2013 Signature of Operator or Agent: M. Mickae	McNulty Tille: Regional Land Manager			
hereby certify that the statements made herein are true and correct to	the best of my knowledge and belief.			
f choosing the second option, submit payment of the \$30.00 handling orm and the associated Form C-1, Form CB-1, Form T-1, or Form CP-	fee with this form. If the fee is not received with this form, the KSONA-1 I will be returned.			
task, I acknowledge that I am being charged a \$30.00 handling				
I certify that, pursuant to the Kansas Surface Owner Notice A owner(s) of the tand upon which the subject well is or will be to CP-1 that I am filling in connection with this form; 2) if the form I form; and 3) my operator name, address, phone number, fax, a	being fled is a Form C.1 or Form CB.1, Form T.1, or Form			
If this form is being submitted with a Form C-1 (Intent) or CB-1 (Catho the KCC with a plat showing the predicted locations of lease roads, tan are preliminary non-binding estimates. The locations may be entered o Select one of the following:	edic Protection Borehole Intent), you must supply the surface owners and k batteries, pipelines, and electrical lines. The locations shown on the plat n the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.			
City:				
Address 2:	county, and in the real estate property tax records of the county treasurer.			
Address 1:	When filing a Form T-1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface owner, information can be found in the records of the register of deeds for the			
Surface Owner Information: Name: See Attached	What Show a Farm I'd involved			
Email Address: adam.e.scott@exxonmobil.com				
Phone: (713 431- 1859 Fax: (713 431-1475	T028S - R036W: SEC 003 N2, S2			
Contact Person: ADAM SCOTT	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
City: HOUSTON State: TX Zip: 77210 + 4358	Lease Name: G M HAMPTON Well #: 1			
Address 2:	County: Grant			
Address 1: P. O. BOX 4358				
	Well Location:			
OPERATOR: License # 5208 Name: EXXONMOBIL OIL CORPORATION	Mini Lagarian			

JUN 1 8 2013

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

CONSERVATION DIVISION WICHITA, KS

Surface Owners

AP#: 15067001420000	Lease Name: _	G M HAMPTO	ON	Well #: <u>1</u>
Owner Name: NIGHTINGALE, JERRELL D & ALFREDA P TR Address: 7600 E RD 8				
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:				
City:	State:	Zip:		

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS