KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

070113_H_Wi Ison_32 - 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 submit	tied with this form.		
Oil Lease: No. of Oil Wells**	Effective Date of Transfer: 7/1/2013		
X Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 204291		
Gas Gathering System:	Lease Name: H WILSON		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
feet from E / W Line	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	T032S - R037W: SEC 013 SE4, NW4, NE4, SW4		
Entire Project: Yes No			
Number of Injection Wells **	County: Stevens		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): CHASE		
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.:			
(API No. II Drill Pit, WO or Haul)	leet from N / S Line of Section		
The of Dir.	feet from E / W Line of Section		
Type of Pit:	Haul-Off Workover Drilling		
Past Operator's License No	Contact Person: LAURIE KILBRIDE		
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone:		
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013		
Title: _RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole		
	KCC WICHITA		
New Operator's License No. 32864	DDENDA WALLED		
New Operator's Name & Address: XTO ENERGY INC.	JUN 10 2013		
	PECEIVED		
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: ONEOK FIELD SERVICES		
OKLAHOMA CITY, OK 73102	Date: 05/31/2013		
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultze</u>		
Acknowledgment of Transfer: The above request for transfer of injection :	authorization, surface pit permit # has been		
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		
Permit No.: Recommended action:	permitted by No.:		
- I TOVALINI CANOTI.	portunition by two.		
Date:	Date:		
Date:	Authorisad Cinnakun		
DISTRICT EPR EPR	PRODUCTION UCL 2 5 2013 UIC 10 -2 5-13		
Mail to: Past Operator New Operator	or District		

Side Two

Must Be Filed For All Wells

Lease Name	H WILSON		* Location: 13 32 37WSW				
Well No.	API No. (YR DRLD/PRE '67)	Foolage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)		
1		25 90 2249FSL	2690 2970FEL	GAS	ACTIVE		
· · · · · · · · · · · · · · · · · · ·		FSL/FNI	FEL/FWL				
	-	FSL/FNI	FEL/FWL				
		FSL/FNI	FEL/FWL				
		FSL/FNI	L FEL/FWL				
		FSL/FNI	L FEL/FWL				
		FSL/FN(FEL/FWL	4100-1004-1004-1004-1004			
		FSL/FNI	FEL/FWL				
		FSL/FNI	FEL/FWL				
		FSL/FNI	FEL/FWL				
		FSL/FNI					
				CAMPAGE AND ADDRESS OF THE PARTY OF THE PART			
		FSL/FNI					
CONTRACTOR DE CONTRACTOR DE LA CONTRACTOR DE		FSL/FNI					
	-	FSL/FNI	FEL/FWL				
		FSL/FN	FEL/FWL	district and the state of the s			
		FSL/FNI	FEL/FWL	4,4448,440	- WOO MAN ON THE		
		FSL/FNI	FEL/FWL		KCC WICHITA		
····	_	FSL/FN/	FEL/FWL		JUN 1 8 2013		
		FSUFN	FEL/FWL	wago min, maniki jigilahiri kari wanangana wa manganawa	RECEIVED		
		EQL/ENI	EEL/EWA				

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.

OPERATOR: License # 5208				
	Well Location:			
Name: EXXONMOBIL OIL CORPORATION	SW Sec. 13 Twp.32 S. R. 37 Eas X West			
Address 1: P. O. BOX 4358	County: Stevens			
Address 2:	Lease Name: H WILSON Well #; 1			
City: HOUSTON State: TX Zip: 77210 + 4358 Contact Person: ADAM SCOTT	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Contact Person: ADAM SCOTT Phone: (713 431 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	T032S - R037W: SEC 013 SE4, NW4, NE4, SW4			
Email Address: adam.e.scott@exxonmobil.com				
Surface Owner Information:				
Name: See Attached				
Address 1:	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			
Address 2:	county, and in the real estate property tax records of the county treasurer.			
City: State: Zip:+				
owner(s) of the land upon which the subject well is or will be	Act (House Bill 2032), I have provided the following to the surface located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address.			
I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax,	located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form height being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the powner(s). To mitigate the additional cost of the KCC performing this			
I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax. I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 handling.	located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ag fee, payable to the KCC, which is enclosed with this form.			
I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax. I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 handling the second option, submit payment of the \$30.00 handling.	located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form height being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ag fee, payable to the KCC, which is enclosed with this form. Ag fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.			
I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 handling the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CB-1 hereby certify that the statements made herein are true and correct	located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form height being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ag fee, payable to the KCC, which is enclosed with this form. Ag fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned.			
 X I certify that, pursuant to the Kansas Surface Owner Notice owner(s) of the land upon which the subject well is or will be CP-1 that I am filing in connection with this form; 2) if the form form; and 3) my operator name, address, phone number, fax, ☐ I have not provided this information to the surface owner(s). I KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 handling the second option, submit payment of the \$30.00 handling form and the associated Form C-1, Form CB-1, Form T-1, or Form CB. I hereby certify that the statements made herein are true and correct 	located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form he being filed is a Form C-1 or Form CB-1, the plat(s) required by this and email address. acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ang fee, payable to the KCC, which is enclosed with this form. And fee with this form. If the fee is not received with this form, the KSONA-1 P-1 will be returned. Title: Regional Land Manager KCC WICHIT.			

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

RECEIVED

Surface Owners

API#:	1518900	2390000	Lease Name: _	H WIL	SON.		Well #: _1
Own	er Name:	WILSON HEIRS,	OLETA				
		Attn: FULLER, DO PO BOX 426	RIS				
	City:	HUGOTON	State:	KS	Zip:	67951-0426	
	ner Name:						
	Address:						
	City:		State:		Zip:		
	ner Name: Address:						
	City:		State:		Zip:		
	er Name: Address:						
	City:		State:		Zip:		
	ner Name: Address:						
	City:		State:		Zip:		

JUN 18 2013
RECEIVED