# 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 Compliance with the Kansas Surface Owner Notification Act,

Check Applicable Boxes: MUST be sub	e with the Kansas Surface Owner Notification Act, mitted 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	Effective Date of Transfer: 7/1/2013  KS Dept of Revenue Lease No.: 201780  Lease Name: HARPER
Enhanced Recovery Project Permit No.:  Entire Project:	Legal Description of Lease: T033S - R035W: SEC 022 All  County:Stevens  Production Zone(s):CHASE  Injection Zone(s):
Surface Pit Permit No.:  (API No. N Drill Pit, WO or Haul)  Type of Pit: Emergency Burn Settling  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	Soline of Section   N / Soline of Section   Section   E / White of Section   Haul-Off   Workover   Drilling
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	Signature:
Acknowledgment of Transfer: The above request for transfer of injection a noted, approved and duly recorded in the records of the Kansas Corporation of Commission records only and does not convey any ownership interest in the a	Commission. This acknowledgment of transfer partains to Kansas Corporation
is acknowledged as the new operator and may continue to inject fluids as authorized by Permit No.: Recommended action:	is acknowledged as the new operator of the above named lease containing the surface pit permitted by No.:
Date:	Date:

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

#### Side Ton

#### Must Be Filed For All Wells

Lease Name	: HARPER		Location: 2	2 33 35WNE	
Well No.	API No. (YR DRLD/PRE '67)	Foolage from (i.e. FSL = Feet)	Footage from Section Line (i.e. FSL = Feet from South Line)		Well Status (PROD/TA'D/Abandoned
<b>A</b> 1	15189003450000	2970FSL	2310FEL	GAS	ACTIVE
		- FSL/FNL	FEUFWL		
		FSUFNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
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		FSL/FNL	FEUFWL		
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		- FSL/FNL	FEUFWL		
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		FSL/FNL	FEUFWL _		RECEIVED

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 Plugging Application).

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

Name: EXXONMOBIL OIL CORPORATION  Address 1: P. O. BOX 4358  Address 2: City: HOUSTON State: TX Zip: 77210 + 4358  Contact Person: ADAM SCOTT  Phone: ( 713 431- 859 Fax: ( 713 431-1475  Email Address: adam.e.scott@exxonmobil.com  Surface Owner Information:  Name: See Attached  Address 1:	Well Location:		
Address 1: P. O. BOX 4358  Address 2: City: HOUSTON State: TX Tip: 77210 + 4358  Contact Person: ADAM SCOTT  Phone: 713 431- Fax: 713 431-1475  Email Address: adam.e.scott@exxonmobil.com  Surface Owner Information:  Name: See Attached	County: <u>Stevens</u> Lease Name: <u>HARPER</u> If filing a Form 7-1 for multiple wells on a lease, enter the legal description of the lease below:		
City: HOUSTON State: TX Zip: 77210 +4 4358  Contact Person: ADAM SCOTT  Phone: { 713	If filing a Form T-1 for multiple wells on a lease, enter the legal description o the lease below:		
Contact Person: ADAM SCOTT  Phone: { 713	If filing a Form T-1 for multiple wells on a lease, enter the legal description o the lease below:		
Phone: { 713 431- 1600 Fax: { 713 431-1475 Fax	was reade DEROM.		
Email Address: adam.e.scott@exxonmobil.com  Surface Owner Information:  Name: See Attached	1033S - R035W: SEC 022 All		
Surface Owner Information:  Name: See Attached			
Name: See Attached			
Name: See Attached Address 1:			
Address 1:	When filing a Fores T 1 involving endants made		
	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		
Address 2:	owner information can be found in the records of the register of deeds for the county, and in the real estate property tax records of the county treasurer.		
City:	the county wearing.		
are preliminary non-binding estimates. The locations may be entered on t Select one of the following:	, and a specific pair may be subnimed.		
I certify that, pursuant to the Kansas Surface Owner Notice Act owner(s) of the land upon which the subject well is or will be loce CP-1 that I am filing in connection with this form; 2) if the form beform; and 3) my operator name, address, phone number, fax, and	ing filed is a Form C-1 or Form CB-1, Form T-1, or Form ing filed is a Form C-1 or Form CB-1, the plat(s) required by this I email address.		
I have not provided this information to the surface owner(s). I ack KCC will be required to send this information to the surface owner task, I acknowledge that I am being charged a \$30.00 handling fe	nowledge that, because I have not provided this information, the er(s). To mitigate the additional cost of the KCC performing this e, payable to the KCC, which is enclosed with this form.		
choosing the second option, submit payment of the \$20.00 handling (s.	e with this form. If the fee is not received with this form, the KSONA-1 will be returned.		
f choosing the second option, submit payment of the \$30.00 handling fed form and the associated Form C-1, Form CB-1, Form T-1, or Form CP-1 we hereby certify that the statements made herein are true and correct to the	om be recorned.		

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

KCC WICHITA

JUN 18 2013

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## **Surface Owners**

API#:	15189003450000	Lease Name: _	HARPER	
		ALVENA DARLENE		
•	Address: 1299 ROA	ND 26		
	City: HUGOTO	N State:	KS Zip:	67951-5157
	er Name:			
4	Address:			
	City:	State:	Zip:	
	er Name: Address:			
	City:	State:	Zip:	
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	City:	State:	Zip:	

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JUN 18 2013

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