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#### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1 Merch 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 submitted with this form. Oil Lease: No. of Oil Wells \_ 7/1/2013 Effective Date of Transfer: Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: \_ 220541 Gas Gathering System:\_ Lease Name: INGLES A Saltwater Disposal Well - Permit No.: \_\_ 23 Twp. 29 R. 36W \_\_feet from N/ S Line Legal Description of Lease: \_\_ feet from 🔲 E / 🦳 W Line T029S - R036W: SEC 023 AII Enhanced Recovery Project Permit No.: \_ Entire Project: Yes No Number of Injection Wells. County: Grant Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zone(s): CHASE \*\* Side Two Must Be Completed. Injection Zone(s):\_ Surface Pit Permit No.: \_ leet from N / S Line of Section (API No. II Drill Pit. WO or Haul) teet from E / W Line of Section Type of Pit: Emergency Bum Workover OR Settling Haul-Off Drilling Past Operator's License No. 5208 Contact Person: \_\_LAURIE KILBRIDE Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: \_713-431-1182 P. O. BOX 4358, HOUSTON, TX 77210-4358 05/31/2013 **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** Signature: Andrew D. Pole RECEIVED BRENDA WALLER KANSAS CORPORATION COMMISSION New Operator's License No. -Contact Person-New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 Phone: 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: WGP-KHC LLC CONSERVATION DIVISION WICHITA, KS **OKLAHOMA CITY, OK 73102** 05/31/2013 Title: SR. OPERATIONS VICE PRESIDENT Signature: Douglas C. Schultze Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #\_\_\_\_\_ noted, approved and duty 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 Recommended actions permitted by No.: \_\_ Date: Authorized Signature Authorized Signature DISTRICT -

**New Operator** 

Mail to: Past Operator\_

PRODUCTION

#### Side Two

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#### Must Be Filed For All Wells

* Lease Name:	INGLES A	* Location: 23 29 36WSW					
Well No.	API No. (YR DRLD/PRE '67) 15067213360001	Footage from (i.e. FSL = Feet f	Section Line	Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned		
3 INF		1250FSL	1400FWL	GAS	ACTIVE		
		FSL/FNL	FEUFWL				
		FSL/FNL	FEUFWL				
		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				
		FSL/FNL	FEL/FWL				
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		FSL/FNL	FEL/FWL				
<del>gerande</del> nde i stegge promot i paggage kinn i na ayaya 1994.	* Intermediate to the companies of the c	FSL/FNL	FEL/FWL	A CONTRACTOR OF THE CONTRACTOR			
		FSL/FNL	FEL/FWL				
		FSL/FNL	FEL/FWL		RECEIVED		
		FSL/FNL	FEL/FWL .	KANSAS	JUN 1 8 2013		

#### A separate sheet may be attached if necessary

... FEL/FWL

FEL/FWL .

CONSERVATION DIVISION WICHITA, KS

\_FSL/FNL \_\_\_\_

\_FSL/FNL \_

<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.

OPERATOR: License # 52	08					
Name: EXXONMOBIL OIL CORPORATION		. Well Location:				
The state of the s	No. of the Control of					
		County: Grant				
	State: TX 7ip: 77210 + 4358	Lease Name: INGLES A Well #: 3 INF				
Contact Person: ADAM SCO		If filing a Form 1-1 for multiple wells on a lease, enter the legal description of the lease below:				
Phone: 713 431- 1850	713 431-1475	T029S - R036W: SEC 023 All				
Email Address: adam.e.sco		<del>-</del> -				
Surface Owner Information:						
Name: See Attached	CONTRACT A DESCRIPTION OF CONTRACT A CONTRACT AND CONTRACT A CONTRACT ACCORDANCE A CONTRACT ACCORDANCE ACCORDA	When filing a Form 1.1 involving multiple surface owners, attach an additional				
		Sheet USUNG All of the information to the left for each surface owner. Surface				
Address 2:		<ul> <li>country information can be tound in the records of the register of deeds for the country, and in the real estate property tax records of the country treasurer.</li> </ul>				
	State:+ Zip:+					
Select one of the following:		d on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.				
CP-1 that I am filing form; and 3) my oper	in connection with this form; 2) if the forator name, address, phone number, factor name, address, phone number, factor name, address, phone number, factor information to the surface object.	Act (House Bill 2032), I have provided the following to the surface e located: 1) a copy of the Form C-1. Form CB-1, Form T-1, or Form to being filed is a Form C-1 or Form CB-1, the plat(s) required by this , and email address.  I acknowledge that, because I have not provided this information, the owner(s). To mitigate the additional cost of the KCC performing this ng fee, payable to the KCC, which is enclosed with this form.				
choosing the second option		000 fee with this form. If the fee is not considered with this form, the vector				
nereby certify that the state	ments made herein are true and correc	to the best of my knowledge and belief.				
ate: 6/15/2013 S	ignature of Operator or Agent:	had McNulty Regional Land Manager				
API # :15067213360001	KDOR #2205	1 RECEIVED KANSAS CORPORATION COMMISSI				

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

JUN 1 8 2013

## **Surface Owners**

API#: 15067213360001

API#: 15067213360001	Lease Name: _	INGLES A		Well #: _3 INF
Owner Name: DEYOE, DENNI	S W & SHERYL L			
<b>Address:</b> 8173 E RD 17				
City: ULYSSES	State:	KS <b>Zip:</b> 678	80	
Owner Name: PINNICK, THOM Address: PO BOX 626	AS J & LITTLESTA	r, Paulin		
City: ULYSSES	State:	KS <b>Zip:</b> 678	80	
Owner Name: HAGERMAN, KE Address: 521 N JOYCE ST	NNETH & KATHRY	N		
City: ULYSSES	State:	KS <b>Zip</b> : 6788	30	
Owner Name: Address:				
City:	State:	Zip:		
Owner Name: Address:				
City:	State:	Zip:		

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS