### KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form T-1
March 20:10
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 Effective Date of Transfer-Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: \_ 217257 Gas Gathering System: Lease Name: \_ M L HOGAN Saltwater Disposal Well - Permit No.: \_\_ 5 Twp. 31 R. 35W EXW \_\_feet from \_\_ N / \_\_ S Line Legal Description of Lease: \_\_ teel from 🔲 E / 🔲 W Line T031S - R035W: SEC 005 All Enhanced Recovery Project Permit No.: \_ Entire Project: Yes No Number of Injection Wells County: Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE CHASE Production Zone(s):\_\_\_ \*\* Side Two Must Be Completed. Injection Zone(s): Surface Pit Permit No.: \_ (API No. If Drill Pit, WO or Haul) feet from E / W Line of Section Type of Pit: Emergency Burn Settling Haul-Off Workover & K Drilling LAURIE KILBRIDE Past Operator's License No. Contact Person-RECEIVED KANSAS CORPORATION COMMISSION Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: 713-431-1182 P. O. BOX 4358, HOUSTON, TX 77210-4358 05/31/2013 Date: .... **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** Signature: \_\_\_\_\_Andrew D. Cole CONSERVATION DIVISION WICHITA, KS New Operator's License No. 32864 **BRENDA WALLER** Contact Person: New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: WGP-KHC LLC 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 #\_\_ 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.: \_ **Authorized Signature** Authorized Signature DISTRICT -**PRODUCTION** 

**New Operator** 

Mail to: Past Operator

#### Side Two

#### Must Be Filed For All Wells

* Lease Name	: ML HOGAN	* Location: 5 31 35W S W					
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oll/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned		
3 INF	15189214800000	1250FSL	3378FEL	GAS	ACTIVE		
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		FSL/FNL	FEL/FWL				
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		FSL/FNL	FEL/FWL				
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		FSUFNL	FEL/FWL		-		
		FSL/FNL	FEL/FWL				
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		FSL/FNL		MAR SATISFA MARTINIA MARTINIA SA PARA PARA PARA PARA PARA PARA PARA			
			FEL/FWL	T. 1840	-		
	***************************************	FSL/FNL	FEL/FWL				
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		FSL/FNL	FEL/FWL	KANSAS	RECEIVED S CORPORATION COMMISSION		
		FSL/FNL	FEL/FWL	- 100 db - 1	JUN 1 8 2013		
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION		
		FSL/FNL	FEL/FWL		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 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 Address 1: P. O. BOX 4358	
	County: Stevens
Address 2:	4000
City: HOUSTON State: TX 7 Contact Person: ADAM SCOTT	(ip:
Phone: ( 713 431-1854 Fax: (_	
Email Address: adam.e.scott@exxonmobil.c	
Surface Owner Information:	
Name: See Attached	When filing a Form T.1 involving multiple surface owners, attach an additional
Address 1:	sheet listing all of the information to the left for each surface owner. Surface
Address 2:	YMMELINIOUTHARD DE ROUND IN THE RECORDS OF THE REPOSTER AT DEADS for the
City: State: Z	
Select one of the following:	locations may be entered on the Form C-1 plat, Form CB-1 plat, or a separate plat may be submitted.
CP-1 that I am filing in connection w	is Surface Owner Notice Act (House Bill 2032), I have provided the following to the surface subject well is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1, or Form tith this form; 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) required by this ress, phone number, fax, and email address.
NCC will be required to send this int	o the surface owner(s). I acknowledge that, because I have not provided this information, the formation to the surface owner(s). To mitigate the additional cost of the KCC performing this charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.
task, I acknowledge that I am being of the second option, submit payme	formation to the surface owner(s). To mitigate the additional cost of the KCC performing this
task, I acknowledge that I am being of the second option, submit payme form and the associated Form C-1, Form CB	commation to the surface owner(s). To mitigate the additional cost of the KCC performing this charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.  Bent of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSCALA.
task, I acknowledge that I am being of the second option, submit payme form and the associated Form C-1, Form CB	commation to the surface owner(s). To mitigate the additional cost of the KCC performing this charged a \$30.00 handling fee, payable to the KCC, which is enclosed with this form.  ent of the \$30.00 handling fee with this form. If the fee is not received with this form, the KSONA-1  B-1, Form T-1, or Form CP-1 will be returned.  rein are true and correct to the best of my knowledge and belief.

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

### **Surface Owners**

API#:	15189214800000	Lease Name: _	M L HOGAN		Well #: 3 INF			
Owner Name: LAHEY, THOMAS L LIV TR & PATRICIA ETAL								
	Address: 2711 ROAD Z							
	City: MOSCOW	State:	KS Zip:	67952-5246				
	ner Name:							
	Address:							
	City:	State:	Zip:	:				
	ner Name: Address:							
	City:	State:	Zip:					
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	er Name: Address:							
	City:	State:	Zip:					

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS