070113\_Mann\_36.Pdf FormT-1

Authorized Signature

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

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, MUST be submitted with this form. Chack Applicable Boxes: Effective Date of Transfer: \_ Oil Lease: No. of Oil Wells . 202762 Gas Lease: No. of Gas Wells KS Dept of Revenue Lease No.: \_\_\_ Lease Name: MANN Gas Gathering System: Saltwater Disposal Well - Permit No.: \_\_ Sec. 1 Twp. 33 R. \_ \_ feet from N / S Line Spot Location: \_ Legal Description of Lease: feet from E / W Line T033S - R036W: SEC 001 SE4, NE4, NW4, SW4 Enhanced Recovery Project Permit No.: \_ Entire Project: Yes No County: Stevens Number of Injection Wells Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE CHASE Production Zone(s): \*\* Side Two Must Be Completed. Injection Zone(s):\_ teet from N / S Line of Section Surface Pit Permit No.: \_ (API No. If Drill Pit. WO or Haul) feet from E / W Line of Section Workover Drilling Haul-Off Settling ☐ Bum Type of Pit: Emergency LAURIE KILBRIDE Past Operator's License No. \_5208 Contact Person: 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. Cole <del>KCC WICHI</del>TA JUN 18 2013 **BRENDA WALLER** New Operator's License No. \_32864 Contact Person: . New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 RECEIVED Oil / Gas Purchaser: ONEOK FIELD SERVICES 210 PARK AVENUE, SUITE 2350 05/31/2013 OKLAHOMA CITY, OK 73102 Signature: <u>Douglas C. Schultze</u> Title: SR. OPERATIONS VICE PRESIDENT Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #\_\_\_ 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 of the above named lease containing the surface pit the new operator and may continue to inject Iluids as authorized by \_\_\_ . Recommended action: \_ permitted by No.: \_\_\_

**New Operator** 

Authorized Signature

Date:

DISTRICT \_

Mail to: Past Operator\_

#### Side Two

#### Must Be Filed For All Wells

API No. (YR DRLD/PRE '67)  15189003620000	Foolage from (i.e. FSL = Feet foolage from (i.e. FSL = Feet foolage from (i.e. FSL/FNL	2540 2540 2318FEL FEL/FWL	Type of Well (Oll/Gas/INL/WSW) GAS	Well Status (PROD/TA'D/Abandoned  ACTIVE
	FSL/FNL	FEL/FWL		ACTIVE
	FSL/FNL	FEUFWL		_
	FSL/FNL	FEUFWL		
	FSL/FNL			
	FSL/FNL	FEL/FWL		
	FSL/FNL	FEL/FWL		
	FSL/FNL	FEL/FWL		_
	FSL/FNL	FEL/FWL		
	FSL/FNL	, FEL/FWL		
	FSL/FNL	FEL/FWL		
	FSL/FNL	FEL/FWL		
	FSL/FNL	FEL/FWL		_
	FSL/FNL	FEL/FWL		
		FEUFWL		
	FSL/FNI	FEL/FWL		
	FSL/FNI	FEUFWL		- Stration legentary desirable and the strategy of the strateg
Manuscrick detailed with an extraordisc consequence and actually account of the detailed calculation and actual ac				
in and the second secon				
				KCC WICHITA
				JUN 18 2013
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			FSL/FNL   FEL/FWL	FSL/FNL   FEL/FWL

#### 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.

2002	Well Location:			
OPERATOR: License # 5208  Name: EXXONMOBIL OIL CORPORATIO				
Name: EXXONMOBIL DIE CORFORATIO Address 1: P. O. BOX 4358	A Company of the Comp			
Address 2:		NN Well #: 1		
City: HOUSTON State: TX	Zip:	It filing a Form 1-1 for multiple wells on a lease, enter the legal description of the lease below: T033S - R036W: SEC 001 SE4, NE4, NW4, SW4		
Contact Person: ADAM SCOTT Phone: ( 713 431-[854 Fax:	713 431-1475 T033S - R036W:			
Phone: (				
Surface Owner Information:				
Name: See Attached	When filing a For	When filing a Form 1.1 involving multiple surface owners, attach an additional sheet listing all of the information to the left for each surface owner. Surface		
Address 1:	owner information	a can be found in the records of the register of deeds for the		
Address 2:	CONTRACTOR OF THE CONTRACTOR O	real estate property tax records of the county treasurer.		
City: State:	_ Zip:+			
are preliminary non-binding estimates. T Select one of the following:	he locations may be entered on the Form C-1 plat,	s, and electrical lines. The locations shown on the plat , Form CB-1 plat, or a separate plat may be submitted.		
owner(s) of the land upon which CP-1 that Lam filing in connection	ansas Surface Owner Notice Act (House Bill 2032 In the subject well is or will be located: 1) a copy of on with this form; 2) if the form being filed is a Form address, phone number, fax, and email address.	i me roma c. i rumi Gost. Pumi et di 1900		
VCC will be required to sond thi	ion to the surface owner(s). I acknowledge that, be is information to the surface owner(s). To mitigate ling charged a \$30.00 handling fee, payable to the	tile additional cost of the trop benefitting the		
task, I acknowledge that I am be				
task, I acknowledge that I am be		If the fee is not received with this form, the KSONA-		
task, I acknowledge that I am be If choosing the second option, submit po form and the associated Form C-1, Form	eavment of the \$30.00 handling fee with this form.			
task, I acknowledge that I am be If choosing the second option, submit po- form and the associated Form C-1, Form	ayment of the \$30.00 handling fee with this form.  TOB-1, Form T-1, or Form CP-1 will be returned.  The herein are true and correct to the best of my kno  The Wichael William			

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

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### **Surface Owners**

API#: 1518	9003620000	Lease Name:	MANN			Well #:
Owner Na	ne: MANN, JESSE E	FAM TR TTEE				
	ss: 2178 ROAD Q					
c	ity: HUGOTON	State:	KS	Zip:	67951-5139	
Owner Na Addr						
C	City:	State:		Zip:		
Owner Na Addr						
(	City:	State:		Zip:		
Owner Na Addr						
C	City:	State:		Zip:		
Owner Na Addr						
(	City:	State:		Zip:		

KCC WICHITA

JUN 18 2013

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