KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

070113_Morrell_14.Pdf_{srmT-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:	ted 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.: 208471				
Gas Gathering System:	•				
Saltwater Disposal Well - Permit No.:	Lease Name: MORRELL NW.sec. 14 Twp. 32 R. 36W EXW Legal Description of Lease:				
Spot Location: feet from N / S Line					
feet from E / W Line					
Enhanced Recovery Project Permit No.:	T032S - R036W: SEC 014 N2, S2				
Entire Project: Yes No					
Number of Injection Wells**	County: Stevens				
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Production Zone(s): COUNCIL GROVE				
** Side Two Must Be Completed.					
Side I No Mast De Completed.	Injection Zone(s):				
Surface Pit Permit No.:	leet from N / S Line of Section				
(API No. If Drill Pit, WO or Haul)	feet from E / W Line of Section				
Type of Pit: Emergency Burn Settling	Haul-Off Workover				
	Contact Bosson LAURIE KILBRIDE RECEIVED				
Past Operator's License No. 5208	Contact Person: KANSAS CORPORATION COMMISSIO				
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182				
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 JUN 1 8 2013				
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Audrew D. Cole CONSERVATION DIVISION WICHITA, KS				
	World, to				
32864	Contact Person: BRENDA WALLER				
New Operator's License No. 32864 V	405-319-3259				
New Operator's Name & Address: XTO ENERGY INC.	Phone:				
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: 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.				
in antended of	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.:				
Date:	Date:				
10/11/13	PRODUCTION 10.17.13 UIC 10-17-13				
DISTRICT EPR / U / G / S Mail to: Past Operator New Opera					

Side Two

Must Be Filed For All Wells

KDOR Lease								
Lease Name:	MORRELL	MORRELL Location: 14 32 36WNW						
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet f	Section Line rom South Line)	Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned			
12	15189205830000 🗸	2450FNL	2450FWL	GAS	ACTIVE			
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		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
		FSL/FNL	FEL/FWL					
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		FSL/FNL	FEL/FWL		JUN 1 8 2013			
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION WICHITA, KS			
		FSL/FNL	FEL/FWL					

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.

Select the corresponding form being filed: C-1 (ment) CB-	1 (Cathodic Protection Boxehole Intent) XT-1 (Transfer) CP-1 (Plugging Application)
OPERATOR: License # 5208 Name: EXXONMOBIL OIL CORPORATION	
Address 1: P. O. BOX 4358	County: Stevens
Address 2:	Lease Name: MORRELL Well #: 12
City: HOUSTON State: TX Zip: 77210 + 4358	
Contact Person: ADAM SCOTT	the lease below: T032S - R036W: SEC 014 N2, S2
Phone: (713 431- 1859 Fax: (713 431-1475	
Email Address: adam.e.scott@exxonmobil.com	_
Surface Owner Information:	
Name: See Attached	When filing a Form F1 involving multiple surface owners, attach an additional
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:	and the state of t
Cay:	_
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 for form; and 3) my operator name, address, phone number, far. I have not provided this information to the surface owner(s).	I acknowledge that, because I have not provided this information, the
KCC will be required to send this information to the surface task, I acknowledge that I am being charged a \$30.00 hand	e owner(s). To mitigate the additional cost of the KCC performing this ling fee, payable to the KCC, which is enclosed with this form.
form and the associated Form C-1, Form CB-1, Form T-1, or Form (
I hereby certify that the statements made herein are true and correct	a canada
Date: 6/15/2013 Signature of Operator or Agent:	Tille: Regional Land Manager RECEIVED
API # :15189205830000 KDOR #2084	KANSAS CORPORATION COMMISSION
	JUN 1 8 2013

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

CONSERVATION DIVISION WICHITA, KS

Surface Owners

API#:_	1518920	5830000	Lease Name: _	MORE	RELL		 Well #:	1–2
Own	er Name:	MOSS FARM LLC	:					
Address: 147301 CALIBER DR STE 300								
	City:	OKLAHOMA CITY	State	: OK	Zip:	73134		
	ner Name: Address:							
	City:		State:		Zip:			
0	Nama							
	er Name: Address:							
	Additos.							
	City:	:	State	:	Zip:			
	er Name:							
	Address:							
	City:		State:		Zip:			
	er Name: Address:							
	City:		State	;	Zip:			
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RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS