070113_Robert_Moore.pdf

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:	Miled with this form.
Oil Lease: No. of Oil Wells	Effective Date of Transfer: 7/1/2013
Gas Lease: No. of Gas Wells	KS Dept of Revenue Lease No.: 219739
Gas Gathering System:	Lease Name: ROBERT MOORE
Saltwater Disposal Well - Permit No.:	
Spot Location: feet from N / S Line	
feet from E / W Line	Legal Description of Lease:
Enhanced Recovery Project Permit No.:	T027S - R037W: SEC 011 N2, SE4, SW4
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.:	feet 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 C 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	Date:05/31/2013
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature:
New Operator's License No. 32864	Contact Person: BRENDA WALLER RECEIVED
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259 KANSAS CORPORATION COMMISSION
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: ONEOK FIELD SERVICES JUN 1 8 2013
OKLAHOMA CITY, OK 73102	Date: 05/31/2013 CONSERVATION DIVISION
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultze</u> WICHITA, KS
Acknowledgment of Transfer: The above request for transfer of injection	authorization, surface pit permit # has been
•	Commission. This acknowledgment of transfer pertains to Kansas Corporation
Commission records only and does not convey any ownership interest in the	-
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:
Authorized Signature /	Authorized Signature
DISTRICT EPR /0/22/13	PRODUCTION OCT 2 3 2013 UIC 10 -23-13
Mail to: Past Operator New Operator	

Side Two

Must Be Filed For All Wells

KDOR Lease N	o.:			
* Lease Name:	ROBERT MOORE	* Location:	11 27 37W NW	
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)	Type of Well	Well Status

*Lease Name:	ROBERT MOORE	* Location: 11 27 37W / V W			
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
3 INF	15067213050001	1250FNL	1250FWL	GAS	ACTIVE
		FSUFNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
			Value and the second se		
			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		
<u></u>		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	Sant. All believes a second special second s	
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
****		FSL/FNL	FEL/FWL	-	
	400-00-00-00-00-00-00-00-00-00-00-00-00-	FSL/FNL	FEL/FWL		
			FEL/FWL		
		FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL	KAN	RECEIVED SAS CORPORATION COMMISSION
Winds die en	The state of the s	FSL/FNL	FEL/FWL		JUN 1 8 2013
		FSL/FNL	FEL/FWL		CONSERVATION DIVISION
					- WICHITA, KS

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 (Intent) CB-1 (Calhodic Protection Borehole Int	erit) XT-1 (Transfer) CP-1 (Plugging Application)		
OPERATOR: License # 5208	Well Location:			
Name: EXXONMOBIL OIL CORPORATION		Sec. 11 Twp.27 S. R. 37 Eas X West		
Address 1: P. O. BOX 4358	County: Grant			
Address 2:	Lease Name: ROBER	T MOORE Well #: 3 INF		
City: HOUSTON State: TX Zip		nultiple wells on a lease, enter the legal description of		
Contact Person: ADAM SCOTT	70070 D007W. 0F0	the lease below: T027S - R037W: SEC 011 N2, SE4, SW4		
Phone: (713 431 1859 Fax: (7	<u>13 431-1475 </u>	VII N2, GE4, GW4		
Email Address: adam.e.scott@exxonmobil.co	т			
Surface Owner Information:		an also and the also also also also also also also also		
Name: See Attached		involving multiple surface owners, attach an additional		
Address 1:		nformation to the left for each surface owner. Surface be found in the records of the register of deeds for the		
Address 2:		estate property tax records of the county treasurer.		
City: State: Zip	p:+			
Select one of the following:	ocations may be entered on the Form C-1 plat, Form Surface Owner Notice Act (House Bill 2032), I h			
owner(s) of the land upon which the s CP-1 that I am filing in connection with	subject well is or will be located: 1) a copy of the it th this form: 2) if the form being filed is a Form C-1 ess, phone number, fax, and email address.	Form C-1, Form CB-1, Form T-1, or Form		
KCC will be required to send this info	the surface owner(s). I acknowledge that, becaus ormation to the surface owner(s). To mitigate the a harged a \$30.00 handling fee, payable to the KCC,	additional cost of the KCC performing this		
If choosing the second option, submit paymer form and the associated Form C-1, Form CB-	nt of the \$30.00 handling fee with this form. If the -1, Form T-1, or Form CP-1 will be returned.	fee is not received with this form, the KSONA-1		
I hereby certify that the statements made here	ein are true and correct to the best of my knowledg	ge and belief.		
Date: 6/15/2013 Signature of Operator	or or Agent:	Title: Regional Land Manager		
API # :15067213050001	KDOR #219739	RECEIVED KANSAS CORPORATION COMMISSION		

JUN 1 8 2013

Surface Owners

API#:	15067213050001	Lease Name:	ROBERT MOORE	Well #: 3 INF
	er Name: SHORTER, VI Address: 4711 N HWY 2		ARLES P TRUS	
	City: ULYSSES	State:	KS Zip : 67880	
	er Name: Address:			
	City:	State:	Zip:	
	er Name: Address:			
	City:	State:	Zip:	
	er Name: Address:			
	City:	State:	Zip:	
	er Name: Address:			
	City:	State:	Zip:	

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS