## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 7-1 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,

MUST be submitted with this form

Check Applicable Boxes: MUST be subr	mitted with this form.
Check Applicable Boxes:  Oil Lease: No. of Oil Wells  X Gas Lease: No. of Gas Wells  Gas Gathering System:  Saltwater Disposal Well - Permit No.:  Spot Location: feet from N / S Line  feet from E / W Line  Enhanced Recovery Project Permit No.:  Entire Project: Yes No  Number of Injection Wells  Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	Effective Date of Transfer: 7/1/2013  KS Dept of Revenue Lease No.: 207332  Lease Name: W J FOX
Surface Pit Permit No.:	feet from N / S Line of Section
(AP! No. If Drill Pit, WO or Haul)  Type of Pit: Emergency Burn Settling	Line of Section   N / S Line of Section   Section   Line of Section   Section   Haul-Off   Workover   D
Past Operator's License No	Contact Person: LAURIE KILBRIDE RECEIVED
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182
P. O. BOX 4358, HOUSTON, TX 77210-4358	11 (1) 4 0 2012
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Date: 05/31/2013 JUN 16 2015  Signature: Andrew D. Cole CONSERVATION DIVISION WIGHTA, KS
New Operator's License No. 32864 /	Contact Person: BRENDA WALLER
New Operator's Name & Address: XTO ENERGY INC.	Phone: 405-319-3259
210 PARK AVENUE, SUITE 2350	Oil / Gas Purchaser: WGP-KHC LLC
OKLAHOMA CITY, OK 73102	Dale: 05/31/2013
Title: SR. OPERATIONS VICE PRESIDENT	Signature: Douglas C. Schultze
Acknowledgment of Transfer: The above request for transfer of injection noted, approved and duly recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the	Commission. This acknowledgment of transfer pertains to Kansas Corporation
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 10/30/13	PRODUCTION OCT 3 1 2013 UIC 10-31-13
Mail to: Past Operator // / New Operat	

#### Side Two

#### Must Be Filed For All Wells

* Lease Name:	W J FOX Location: <sup>7 31 36W</sup> ; ₩ Z					
Well No.	API No. (YR DRLD/PRE '67)	Foolage from (i.e. FSL = Feet f	Section Line rom South Line)	Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned	
2	15189201730000 /	2694FSL	3880FEL	GAS	ACTIVE	
		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			
		FSL/FNL	FEL/FWL			
		FSUFNL	FEL/FWL		-	
*		FSL/FNL	FEUFWL			
***************************************		FSL/FNL	FEL/FWL			
	****	FSL/FNL	FEL/FWL			
		FSL/FNL	FELFWL	ASSISTANCE AND ANALYSIS ASSISTANCE AND ASSISTANCE A		
		FSL/FNL	FEL/FWL			
Print the state of the first transfer to the state of the		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		RECEIVED	
		FSL/FNL	FEL/FWL .	KANSAS CO	ORPORATION COMMISSION	
		FSL/FNL	FEL/FWL	J	UN 1 8 2013	
		FSL/FNL	FEL/FWL .	CON	SERVATION DIVISION 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.

Select the corresponding form being	g filed: C-1 (Intent)	CB-1 (Cathodic Protection Bore	hole Intent) XT-1 (Trans	fer) CP-1 (Plugging Application)		
OPERATOR: License # 5208		Well Location:				
Name: EXXONMOBIL OIL CORPORA	TION		WZ Sec. 7 Two.31	S. R. 36 Eas X West		
Address 1: P. O. BOX 4358						
Address 2:		Lease Name: W	J FOX	Well #: 2		
City: HOUSTON State: T	Zip: <u>77210 +</u> + 4	358 If filling a Form T	1 for multiple wells on a	lease, enter the legal description of		
Contact Person: ADAM SCOTT	the lease below:	the lease below:				
Phone: ( 713 #31 1859 Fa			T031S - R036W: SEC 007 AII			
Email Address: adam.e.scott@exxonn	nobil.com	<del></del>				
Surface Owner Information:						
Name: See Attached		When filing a Form 1.1 involving multiple surface owners, attach an additional				
	ddress 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:	i ni wikin di dinangkangkangkanan saran ingkangkangkangkangkangkan ini kalini kilay kila sa sanaya		real estate property tax	records of the county treasurer.		
City:State:						
are preliminary non-binding estimates. Select one of the following:		,	•	· · · · · · · · · · · · · · · · · · ·		
X I certify that, pursuant to the I owner(s) of the land upon white CP-1 that I am filing in connect form; and 3) my operator name.  I have not provided this information.	ch the subject well is o ion with this form; 2) if address, phone numi	r will be located: 1) a copy of the form being filed is a Forn per, fax, and email address. her(s). I acknowledge that, be	the Form C-1, Form C-1 or Form CB-1, the cause I have not prov	CB-1, Form T-1, or Form te plat(s) required by this ided this information, the		
KCC will be required to send to task, I acknowledge that I am to	his information to the s	urface owner(s). To mitigate	the additional cost of	the KCC performing this		
f choosing the second option, submit form and the associated Form C-1, For	payment of the \$30.00 m CB-1, Form T-1, or I	handling fee with this form. Form CP-1 will be returned.	lf the fee is not receiv	ed with this form, the KSONA-1		
hereby certify that the statements ma	de herein are true and	correct to the best of my know	wledge and belief.			
Date: 6/15/2013 Signature of	Operator or Agent:	H. Michael McNulty	Title: Re	gional Land Manager		
				KANSAS CORPORATION COMMISSIO		
API # :15189201730000	KDOR	#207332		JUN 1 8 2013		

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

CONSERVATION DIVISION WICHITA, KS

### **Surface Owners**

API#:	15189201730000	Lease Name: _	WJFOX		Well #: _2		
Own	Owner Name: FOX, ROBERT C						
	Address: PO BOX 125						
	City: MOSCOW	State:	KS Zip	<b>p:</b> 67952-0125			
	er Name: Address:						
	City:	State:	Zi	ip:			
	er Name: Address:						
	City:	State:	Ziţ	):			
	or Name: Address:						
	City:	State:	Zip	):			
	r Name: ddress:						
	City:	State:	Zip	d.			

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS