

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,  
MUST be submitted with this form.

Check Applicable Boxes:

- ☐ Oil Lease: No. of Oil Wells \_\_\_\_\_ "
- ☒ Gas Lease: No. of Gas Wells 1 "
- ☐ 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

**\*\* Side Two Must Be Completed.**

Effective Date of Transfer: 7/1/2013

KS Dept of Revenue Lease No.: 207361

Lease Name: W KUHN

\_\_\_\_\_ Sec. N2 Twp. 35 R. 30 ☐ E ☒ W

Legal Description of Lease:

T030S - R035W: SEC 035 W2 NE4, E2 NE4, W2 SE4, E2 SE4,  
SW4, NW4

County: Grant

Production Zone(s): COUNCIL GROVE

Injection Zone(s): \_\_\_\_\_

Surface Pit Permit No.: \_\_\_\_\_  
(API No. if Drill Pit, WO or Haul)

Type of Pit: ☐ Emergency ☐ Burn ☐ Settling

☐ Haul-Off ☐ Workover ☒ Drilling

Past Operator's License No. 5208 ✓

Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION

P. O. BOX 4358, HOUSTON, TX 77210-4358

Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT

Contact Person: LAURIE KILBRIDE

Phone: 713-431-1182

Date: 05/31/2013

Signature: Andrew D. Cole

New Operator's License No. 32864 ✓

New Operator's Name & Address: XTO ENERGY INC.

210 PARK AVENUE, SUITE 2350

OKLAHOMA CITY, OK 73102

Title: SR. OPERATIONS VICE PRESIDENT

Contact Person: BRENDA WALLER

Phone: 405-319-3259

Oil / Gas Purchaser: WGP-KHC LLC

Date: 05/31/2013

Signature: Douglas C. Schultze

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CONSERVATION DIVISION  
WICHITA, KS

**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  
the new operator and may continue to inject fluids as authorized by  
Permit No.: \_\_\_\_\_. Recommended action: \_\_\_\_\_

Date: \_\_\_\_\_  
Authorized Signature \_\_\_\_\_

\_\_\_\_\_ is acknowledged as  
the new operator of the above named lease containing the surface pit  
permitted by No.: \_\_\_\_\_

Date: \_\_\_\_\_  
Authorized Signature \_\_\_\_\_

DISTRICT \_\_\_\_\_ EPR 10/23/13 PRODUCTION OCT 24 2013 UIC 10-24-13

Mail to: Past Operator \_\_\_\_\_ New Operator \_\_\_\_\_ District \_\_\_\_\_

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

\* Lease Name: W KUHN \* Location: 35 30 35W N2

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[illegible]

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WICHITA, KS

\* 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.

**Form KSONA-1**  
July 2010  
**Form Must Be Typed**  
**Form must be Signed**  
**All blanks must be Filled**

Select the corresponding form being filed: ☐ C-1 (Intent) ☐ CB-1 (Cathodic Protection Boxhole Intent) ☒ T-1 (Transfer) ☐ CP-1 (Plugging Application)

**T030S - R035W: SEC 035 W2 NE4, E2 NE4, W2 SE4, E2 SE4, SW4. NW4**

When filing a Form F-1 involving multiple surface owners, attach an additional 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 county, and in the real estate property tax records of the county treasurer.

**JUN 18 2013**  
**CONSERVATION DIVISION**  
**WICHITA, KS**

## Surface Owners

API#: 15067205360000

Lease Name: W KUHN

Well #: C2

Owner Name: ANTHONY, KELLY S & TERESA D

Address: 6607 HWY 190

City: SATANA

State: KS

Zip: 67870

Owner Name: FRIESEN, KENNETH & RITA J JT

Address: PO BOX 285

City: MOSCOW

State: KS

Zip: 67952

Owner Name:

Address:

City:

State:

Zip:

Owner Name:

Address:

City:

State:

Zip:

Owner Name:

Address:

City:

State:

Zip:

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