## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form 7-1
Merch 2010
Form must be Signed
All blanks must be Filed

# 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 \_ Effective Date of Transfer: Gas Lease: No. of Gas Wells \_ KS Dept of Revenue Lease No.: 220424 Gas Gathering System:\_ Lease Name: WILLIAMS Saltwater Disposal Well - Permit No.: \_\_ \_feet from N/SLine Legal Description of Lease: \_ feet from 🔲 E / 🔲 W Line Enhanced Recovery Project Permit No.: \_ T027S - R037W: SEC 019 N2 SE4, S2 NE4, N2 NE4, NW4, SW4, **S2 SE4** 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 Bum Settling ☐ Workover ☐ P Haul-Off 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: Andrew D. Cole New Operator's License No. .. **BRENDA WALLER** Contact Person: \_ RECEIVED KANSAS CORPORATION COMMISSION New Operator's Name & Address: XTO ENERGY INC. 405-319-3259 Phone: 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: ONEOK FIELD SERVICES UN 1 8 2013 OKLAHOMA CITY, OK 73102 05/31/2013 **CONSERVATION DIVISION** WICHITA, KS Title: SR. OPERATIONS VICE PRESIDENT Signature: Douglas C. Schultre 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 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: Authorized Signature **Authorized Signature** DISTRICT. PRODUCTION OCT 2 3 2013 uic 10-23-13 Mail to: Past Operator\_ **New Operator** District \_

#### Side Two

Must Be Filed For All Wells

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		./	
	220424	¥	
KDOR Lease No -	220424		

* Lease Name:	WILLIAMS	* Location: 19 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 (OlVGas/INJ/WSW) (PROD/TA'D/Aban		
2-4 INF	15067213490000	1250FNL	1250FWL	GAS	ACTIVE	
		FSL/FNL				
			FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	——— FEL/FWL			
		FSUFNL	FEL/FWL			
		FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
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		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL _		RECEIVED	
		- FSL/FNL .	FEL/FWL _	KANSA	S CORPORATION COMMISSION	
		FSL/FNL .	FEL/FWL _		JUN 1 8 2013	
		FSL/FNL .	FEL/FWL _		CONSERVATION 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.

OPERATOR: License i	, 5208	Anna II a a cast a ca				
Name: EXXONMOBIL OIL CORPORATION			Well Location:  WWSec. 19 Twp.27 S. R. 37 EastX West			
Address 1: P. O. BO						
Address 2:		~~~~,,, <u></u>	VILLIAMS Well #; 2-4 INF			
	State: <u>TX</u> Zip: <u>77210</u>	40.50	·			
Contact Person: ADAM		the lease below	If filing a Form T-1 for multiple wells on a lease, enter the legal description of the lease below:			
Phone: ( 713 431-12	159 Fax: ( 713 431-14	75 T027S - R037W SW4, S2 SE4	V: SEC 019 N2 SE4, S2 NE4, N2 NE4, NW4,			
Email Address: <u>adan</u>	mail Address: adam.e.scott@exxonmobil.com		9117, 92 JE7			
Surface Owner Informa	ation:					
Name: See Atta	ched		um T.1 involving multiple surface owners, attach an additional			
Address 1:		sheet listing all o	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:	те традиция от техня принципант у традиция, за денняющим образованием поты в денерования у выполняющим и в быть пере и денняющим у принципант у прин	county, and in th	e real estate property tax records of the county treasurer.			
City:	State: Zip:	_+				
Select one of the follow		•	f, Form CB-1 plat, or a separate plat may be submitted.			
Owner(s) of the CP-1 that I am	? Iand upon which the subject we	ll is or will be located: 1) a copy o : 2) if the form being filed is a Forr	2), I have provided the following to the surface of the Form C-1, Form CB-1, Form T-1, or Form n C-1 or Form CB-1, the plat(s) required by this			
KCC will be re	quired to send this information to	the surface owner(s). To mitigate	ecause I have not provided this information, the the additional cost of the KCC performing this KCC, which is enclosed with this form.			
If choosing the second form and the associate	option, submit payment of the \$: d Form C-1, Form CB-1, Form T-	30.00 handling fee with this form. 1, or Form CP-1 will be returned.	If the fee is not received with this form, the KSONA-1			
hereby certify that the	statements made herein are true	and correct to the best of my kno	wledge and belief.			
Date: 6/15/2013	Signature of Operator or Agent:	M. Michael McNulty	Tate: Regional Land Manager			
API # :1506721349	0000 F	(DOR #220424	RECEIVED KANSAS CORPORATION COMMISSION			

JUN 1 8 2013

#### **Surface Owners**

API#:	15067213490000	Lease Name:	WILLIAMS	Well #: _2-4 INF
Own	er Name: WILLIAMS, DON	ALD K.		•
	Address: 1025 W. NEBRAS	SKA AVE		
	City: ULYSSES	State:	KS <b>Zip:</b> 67880	
	ner 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