## 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: MUST be submi	itted 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.: 200517		
Gas Gathering System:	Lease Name: BOCK		
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.:	T032S - R035W: SEC 020 NW4, S2, NE4		
Entire Project: Yes No			
Number of Injection Wells **	County: Stevens		
Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE	1		
	Production Zone(s): CHASE		
** Side Two Must Be Completed.	Injection Zone(s):		
Surface Pit Permit No.:	leet from N / S Line of Section		
(API No. If Drill Pit, WO or Haul)			
Two states and the state of the	feet from E / W Line of Section		
Type of Pit: Emergency Burn Settling	Haul-Off Workover OF Drilling		
Past Operator's License No	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		
Titlo: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	V9(4.		
Title: KSO MANAGERAGENT & ATTORNET-IN-FACT	Signature: <u>Andrew D. Cole</u>		
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: ONEOK FIELD SERVICES		
OKLAHOMA CITY, OK 73102	Date: 05/31/2013 JUN 1 8 2013		
	Date.		
Title: SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultze</u> RECEIVED		
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:	Date:		
11/1/19	PRODUCTION NOV 0.7 2013 UIC 17-13		
Mail to: Past Operator New Operat	PRODUCTION UIC TO THE		

#### Side Two

#### Must Be Filed For All Wells

Lease Name	BOCK		* Location;_20	0 32 35 W N W		
Well No.	API No. (YR DRLD/PRE '67)	Footage from (i.e. FSL = Feet fo		Type of Well (Oil/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)	
1	15189000960000 🗸	29 <b>/</b> 0FSL	29/0FEL	GAS	ACTIVE	
· · · · · · · · · · · · · · · · · · ·						
		FSL/FNL	FEUFWL			
	_	FSL/FNL	FEUFWL			
		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			
		FSUFNL	FEL/FWL			
en in an ainmheilean aid ealmhaile - dairleitheach i baid			n. or associatificate felicitate associa		han talahan mendelah disintah dian dian mendelah dian mendelah dian dian dian dian dian dian dian dian	
		FSL/FNL	FEL/FWL			
ter en sek - e fjek - som øjen <b>gelijke</b> t	N.S. 1 · De la completa de la primera de la primera de la completa del la completa de la completa del la completa de la completa del la completa de la completa de la completa del la completa d	FSL/FNL	FELFWL	Propriet even haber 1 — 14 mil sphillage per 2 — 1 - verbeldspeed find a medical appearance	akil Ben nahin wo or o o kinayaniyas baanniya ni ni o nababagag aahnin ninn	
	_	FSL/FNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		KCC WICHITA	
		FSL/FNL	FEL/FWL		JUN 1 8 2013	
	_	FSL/FNL	FEL/FWL		RECEIVED	

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 1/19/2010 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 # 5208	Wei	Location:
Name: EXXONMOBIL OIL CORPORATION	·	NW Sec. 20 Twp.32 S. R. 35 Eas X West
Address 1:P. O. BOX 4358	Cot	nty: Stevens
Address 2:	Lea	se Name: BOCK Well #: 1
City: HOUSTON State: TX	•	og a Form 1-1 for multiple wells on a lease, enter the legal description of
Contact Person: ADAM SCOTT	TA:	ease below: 2S - R035W: SEC 020 NW4, S2, NE4
Phone: ( 713 #31 1859 Fax: (	713 431-1475	
Email Address: adam.e.scott@exxonmobi	l.com	
Surface Owner Information:		
Name: See Attached	W//w	n filing a Form 1.1 involving multiple surface owners, attach an additional
Address 1:	She-	at listing all of the information to the left for each surface owner. Surface or information can be found in the records of the register of deeds for the
Address 2:		ity, and in the real estate property tax records of the county freasurer.
City: State:	Zip:+	
owner(s) of the land upon which to CP-1 that I am filing in connection form; and 3) my operator name, and I have not provided this information KCC will be required to send this task, I acknowledge that I am being	he subject well is or will be located: with this form; 2) if the form being fil ddress, phone number, fax, and emain to the surface owner(s). I acknowle information to the surface owner(s), ig charged a \$30.00 handling fee, parament of the \$30.00 handling fee with	edge that, because I have not provided this information, the To mitigate the additional cost of the KCC performing this yable to the KCC, which is enclosed with this form.  If the fee is not received with this form, the KSONA-1
I hereby certify that the statements made		
Date: 6/15/2013 Signature of Op	erator or Agent:	dty Title: Regional Land Manager
API#:15189000960000	KDOR #200517	KCC WICHIT

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

JUN 18 2013

RECEIVED

### **Surface Owners**

API#:	1518900	0960000	Lease Name: _	воск			Well #: _1	
Own	er Name:	BOCK, ALFRADA	F TR					
	Address:	% BOCK, HAMILT 1051 260TH AVE	ON					
	City:	BELPRE	State:	KS	Zip:	67519-1902		
Owi	ner Name:							
	Address:							
	City:		State:		Zip:			
	ner Name: Address:							
	City:		State:		Zip:			
	er Name: Address:							
	City:		State:		Zip:			
	er Name: Address:							
	City:		State:		Zip:			

JUN 18 2013
RECEIVED