070113_E_Carpenter_UT.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. MUST be submitted with this form. Check Applicable Boxes: 7/1/2013 Oil Lease: No. of Oil Wells Effective Date of Transfer: Gas Lease: No. of Gas Wells 208220 KS Dept of Revenue Lease No.: _ Gas Gathering System: Lease Name: _ E CARPENTER UT Saltwater Disposal Well - Permit No.: . SE Sec. 35 Two. 33 R. __feet from 🔲 N / 🦳 S Line Legal Description of Lease: ___ feet from \square E / \square W Line T033S - R037W: SEC 035 SE4 SEC 036 NW4, S2 Enhanced Recovery Project Permit No.: _ Entire Project: Yes No Number of Injection Wells. County: Stevens Field Name: COMBINED HUGOTON PANOMA COUNCIL GROVE Production Zone(s): **COUNCIL GROVE** ** 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 ┌ Bum Settling Workover DR Drilling Type of Pit: Emergency Haul-Off LAURIE KILBRIDE Past Operator's License No. Contact Person: Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION Phone: 713-431-1182 P. O. BOX 4358, HOUSTON, TX 77210-4358 Date: 05/31/2013 **RSO MANAGER/AGENT & ATTORNEY-IN-FACT** RECEIVED Signature: ____Andrew D. Cole KANSAS CORPORATION COMMISSION JUN 1 8 2013 New Operator's License No. 32864 / **BRENDA WALLER** Contact Person: . New Operator's Name & Address: XTO ENERGY INC. **CONSERVATION DIVISION** 405-319-3259 Phone: _ WICHITA, KS 210 PARK AVENUE, SUITE 2350 Oil / Gas Purchaser: ONEOK FIELD SERVICES 05/31/2013 OKLAHOMA CITY, OK 73102 Date:_ Title: SR. OPERATIONS VICE PRESIDENT Signature: Douglas C. Schultze Acknowledgment of Transfer: The above request for transfer of injection authorization, surface pit permit #__ 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 the new operator of the above named lease containing the surface pit Permit No.: _ ___ . Recommended action: permitted by No.: __ Authorized Signature Authorized Signature DISTRICT -Mail to: Past Operator_ **New Operator** District

Side Two

Must Be Filed For All Wells

* Lease Name:	E CARPENTER UT	* Location: 35 33 37W SE				
Well No.	API No. (YR DRLD/PRE '67)	Footage from Section Line (i.e. FSL = Feet from South Line)		Type of Well (Oll/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned	
2-3	15189204610000	1250FSL	1250FEL	GAS	ACTIVE	
		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	FEL/FWL		-	
		FSUFNL	FEL/FWL		-	
		FSL/FNL	FEL/FWL			
<u>.</u>		FSL/FNL	FEL/FWL	13.00		
-		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		******	
		FSL/FNL	FEL/FWL	Manuscratic		
		FSL/FNL	FEL/FWL	**************************************		
	**************************************	FSL/FNL	FEL/FWL			
	****	FSL/FNL	FEL/FWL			
		FSL/FNL	FEL/FWL		- RECEIVED	
		FSL/FNL	FEL/FWL	KANS/	AS CORPORATION COMMISSION	
		roi er			JUN 1 8 2013	

_____FEL/FWL .

_fsl/fnl _

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.

F000	—			
OPERATOR: License # 5208	Well Location:			
Name: EXXONMOBIL OIL CORPORATION Address 1: P. O. BOX 4358	•	Eas X_West		
Address 2:				
Contact Person: ADAM SCOTT	0 + 4358 If filing a Form T-1 for multiple wells on a lease, enter the the lease below:	legal description of		
Phone: (713 431-1859 Fax: (713 431-14	T033S - R037W: SEC 035 SE4 SEC 036 NW4, S2			
Email Address: adam.e.scott@exxonmobil.com				
Surface Owner Information:				
Name: See Attached	When filing a Form T-1 involving multiple surface owners, a	attach an additional		
Address 1:	sheet listing all of the information to the left for each surfa	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:	county, and in the real estate property tax records of the co	xinty treasurer.		
City: State: Zip:	+			
owner(s) of the land upon which the subject we CP-1 that I am filing in connection with this form	Owner Notice Act (House Bill 2032), I have provided the following to the ell is or will be located: 1) a copy of the Form C-1, Form CB-1, Form T-1 in: 2) if the form being filed is a Form C-1 or Form CB-1, the plat(s) requires the form being filed is a Form C-1 or Form CB-1, the plat(s) requires	1. or Form		
form; and 3) my operator name, address, phone	e number, fax, and email address.			
KCC will be required to send this information to	ce owner(s). I acknowledge that, because I have not provided this inform the surface owner(s). To mitigate the additional cost of the KCC perfor \$30.00 handling fee, payable to the KCC, which is enclosed with this form	rming this		
If choosing the second option, submit payment of the \$ form and the associated Form C-1, Form CB-1, Form T-	\$30.00 handling fee with this form. If the fee is not received with this forr -1, or Form CP-1 will be returned.	m, the KSONA-1		
hereby certify that the statements made herein are true	e and correct to the best of my knowledge and belief.			
Date: 6/15/2013 Signature of Operator or Agent	:	nager		
API # :15189204610000	KDOR #208220 KANSAS CORPO	ECEIVED DRATION COMMISSION		

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

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS

Surface Owners

API#: 15189204610000 Lease Name: E CARPENTER UT Well #: <u>2-3</u> Owner Name: HARRISON LANDS LLC Address: PO BOX 1221 City: SALIDA State: CO **Zip:** 81201-1221 Owner Name: Address: City: State: Zip: **Owner Name:** Address: City: State: Zip: Owner Name: Address: City: State: Zip: **Owner Name:** Address: City: State: Zip:

RECEIVED KANSAS CORPORATION COMMISSION

JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS