## 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:	t		
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.: 208426		
Gas Gathering System:	Lease Name: FINLEY		
Saltwater Disposal Well - Permit No.:			
Spot Location: feet from N / S Line			
feet from	Legal Description of Lease:		
Enhanced Recovery Project Permit No.:	T032S - R036W: SEC 026 NE4 NE4, S2 NE4, SW4, NW4 SE4, NW4 NE4, NW4, NE4 SE4, S2 SE4		
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.:(API No. If Drill Pit, WO or Haul)  Type of Pit: Emergency Burn Settling	leet from ☐ N / ☐ S Line of Sectionleet from ☐ E / ☐ W Line of Section  Haul-Off ☐ Workover ☐ ☐ Drilling		
	DECEMEN		
Past Operator's License No	Contact Person: LAURIE KILBRIDE RECEIVED COMMISSION KANSAS CORPORATION COMMISSION		
Past Operator's Name & Address: EXXONMOBIL OIL CORPORATION	Phone: 713-431-1182		
P. O. BOX 4358, HOUSTON, TX 77210-4358	Date: 05/31/2013 JUN 1 8 2013		
Title: RSO MANAGER/AGENT & ATTORNEY-IN-FACT	Signature: Andrew D. Cole CONSERVATION DIVISION WICHITA, KS		
New Operator's License No32864	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		
Title: _SR. OPERATIONS VICE PRESIDENT	Signature: <u>Douglas C. Schultze</u>		
Acknowledgment of Transfer: The above request for transfer of injection a noted, approved and duty recorded in the records of the Kansas Corporation Commission records only and does not convey any ownership interest in the a	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:		
11/1/2	New 0.7 2012		
Mail to: Past Operator New Operato	NODOCTION		

#### Side Two

#### Must Be Filed For All Wells

ease Name	FINLEY		Location: 26	32 36NWZ	
Well No.	API No. (YR DRLD/PRE '67)			Type of Well (Ol/Gas/INJ/WSW)	Well Status (PROD/TA'D/Abandoned)
12	15189207240000	2640FNL	1320FWL	GAS	ACTIVE
<del></del>	-	FSL/FNL	FEL/FWL		
		FSL/FNL	FEL/FWL		
	· · · · · · · · · · · · · · · · · · ·	FSL/FNL	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		RECEIVED KANSAS CORPORATION COMMISSI
		FSL/FNL	FEL/FWL		JUN 1 8 2013
	Market and the second s	FSL/FNL	FEL/FWL	The second secon	CONSERVATION DIVISION

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.

5208				
OPERATOR: License # 5208 Name: EXXONMOBIL OIL CORPORATIO	Well Location:	WZ:ec.26 Twp.32 S. R.36 Eas X West		
Address 1: P. O. BOX 4358				
Address 2:	•	INLEY Well #: 12		
City: HOUSTON State: TX	4250			
Contact Person: ADAM SCOTT	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 #31-1859 Fax: (	/ 13 43 1• 14/3	T032S - R036W: SEC 026 NE4 NE4, S2 NE4, SW4, NW4 SE4, NW4 NE4, NW4, NE4 SE4, S2 SE4		
Email Address: adam.e.scott@exxonmob	11004 1164, 11004	7, NET 3E7, 32 3E7		
Surface Owner Information:				
Name: See Attached		om T.1 involving multiple surface owners, attach an additional		
Address 1:		of the information to the left for each surface owner. Surface on can be found in the records of the register of deeds for the		
Address 2:		e real estate property tax records of the county freasurer.		
City: State:	. Zip:+			
Select one of the following:	- isaanons may se emerco an inc. i an inc. i an	t, Form CB-1 plat, or a separate plat may be submitted.		
owner(s) of the land upon which t CP-1 that I am filing in connection	he subject well is or will be located: 1) a copy o	(2), I have provided the following to the surface of the Form C-1, Form CB-1, Form T-1, or Form m C-1 or Form CB-1, the plat(s) required by this		
KCC will be required to send this		pecause I have not provided this information, the e the additional cost of the KCC performing this e KCC, which is enclosed with this form.		
If choosing the second option, submit pay form and the associated Form C-1, Form	ment of the \$30.00 handling fee with this form. CB-1, Form T-1, or Form CP-1 will be returned.	If the fee is not received with this form, the KSONA-1		
I hereby certify that the statements made I	herein are true and correct to the best of my kno	owledge and belief.		
Date: 6/15/2013 Signature of Op	erator or Agent: M. Michael McNulty	Title: Regional Land Manager		
API # :15189207240000	KDOR #208426	RECEIVED KANSAS CORPORATION COMMISSION		

JUN 1 8 2013

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

CONSERVATION DIVISION WICHITA, KS

### **Surface Owners**

API#:	15189207240000	Lease Name: _	FINLEY		Well #:1-2			
Own	Owner Name: FROKS CORPORATION							
	Address: PO BOX 2086							
	City: AUSTIN	State:	TX <b>Zip</b> :	78768-2086				
	ner Name:							
	Address:							
	City:	State:	Zip:					
Own	er Name:							
	Address:							
	City:	State:	Zip:					
	er Name:							
1	Address:							
	City:	State:	Zip:					
	er Name: Address:							
	City:	State:	Zip:					

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JUN 1 8 2013

CONSERVATION DIVISION WICHITA, KS